

Morton J. Fertel

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*****78.75 *****78.75

5/4/99

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Subject: Isralight South Florida, Inc. (proposed corporate name)

Enclosed is an original and one (1) copy of the articles of incorporation and a check for \$78.75 for filing fee and certificate.

Sincerely,

Morton Fertel
7618 Stockton Terrace
Boca Raton, FL 33433
Phone: 561-686-2701

FILED
99 MAY - 7 PM 2:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CFB
5-11-99
2

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Not for Profit Corporation Act, hereby adopt(s) the following Articles of Incorporation:

ARTICLE I NAME

The name of the corporation shall be:

ISRALIGHT SOUTH FLORIDA, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

7618 Stockton Terrace
Boca Raton, FL 33433

ARTICLE III PURPOSE(S)

The specific purpose(s) for which the corporation is organized is(are):

Jewish Education and Programming

ARTICLE IV MANNER OF ELECTION OF DIRECTORS

The manner in which the directors are elected or appointed is:

Initial Founders will Appoint Board of Directors

ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Morton Fertel
7618 Stockton Terrace
Boca Raton, FL 33433

ARTICLE VI INCORPORATOR

The name and address of the Incorporator to these Articles of Incorporation are:

Morton Fertel
7618 Stockton Terrace
Boca Raton, FL 33433



Signature/Incorporator

5-4-99

Date

(An additional article must be added if an effective date is requested.)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.



Signature/Registered Agent

5-4-99

Date

FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA