

Florida Department of State
 of Corporations
 from Filings Cover Sheet

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To: Division of Corporations
 Fax Number : (850)617-6381

From: Account Name : I.N.C. CORPORATE SERVICES
 Account Number : I2000000011
 Phone : (718)888-7773
 Fax Number : (718)888-8559

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 DIVISION OF CORPORATIONS
 TALLAHASSEE, FLORIDA

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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: CS@INCFILINGS.COM

**FLORIDA LIMITED LIABILITY CO.
 PRECISION CONSTRUCTION SOUTH LLC**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

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2022 MAY 26 AM 7:31

CORPORATIONS
 COMMERCIAL
 SERVICES

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

PRECISION CONSTRUCTION SOUTH LLC

(Must contain the words "Limited Liability Company," "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

2745 MILL AVENUE
BROOKLYN, NY 11234

Mailing Address:

2438 EAST 70TH STREET
BROOKLYN, NY 11234

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

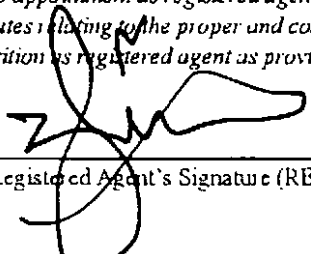
ELIRAN MALOUL
Name
20505 EAST COUNTRY CLUB DRIVE, APT 733
Florida street address (P.O. Box **NOT** acceptable)
AVENTURA FL 33180
City State Zip

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Having been named as registered agent and to accept service of process for the above stated limited liability company 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 as provided for in Chapter 605, F.S..



Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:

Name and Address:

AMBR = Authorized Member

MGR = Manager

AMBR

ELIRAN MALOUL
20505 EAST COUNTRY CLUB DRIVE, APT 733
AVENTURA, FL 33180

AMBR

JOSEPH STEIN
2745 MILL AVENUE
BROOKLYN, NY 11234

(Use attachment if necessary)

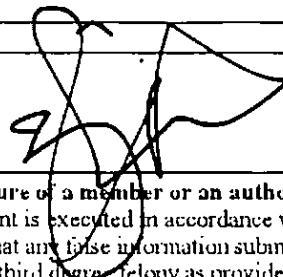
ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member.

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

ELIRAN MALOUL

Typed or printed name of signee

Filing Fees:

- \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

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