Florida Department of State

Division of Corporations Public Access System Katherine Harris, Secretary of State

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H02000028477 6)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)205-0383

From:

Account Name : KANETSKY, MOORE & DEBOER, P.A.

Account Number : 075350000267

: (941)485-1571

Fax Number

: (941)484-7226

LIMITED LIABILITY COMPANY

YOML, LLC

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

H02000028477 6

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

LLAHASSEE, FLORI

ARTICLE I - Name:

The name of the Limited Liability Company is:

YOML, LLC

ARTICLE II - Address

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

800 Mission Valley Blvd. Nokomis, FL 34275

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

The name and street address of the registered agent are:

David C. Heinsler 800 Mission Valley Blvd. Nokomis, FL 34275

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 608, F.S.

David C. Heinsler

This instrument prepared by: Erik R. Lieberman, Esq. P. O. Box 1767 Venice, FL 34284-1767 941-485-1571 FL Bar #393053

1

ARTICLE IV - Management (Check Box if Applicable)

□ The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager-managed company

Signature of a member or authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

David C. Heinsler

Typed or Printed Name of Signee

FILLU SECRETARY OF STAT FALLAHASSEE, FLORI

This instrument prepared by: Erik R. Liebenman, Esq. P. O. Box 1767 Venice, FL 34284-1767 941-485-1571 FL Bar #393053