## \* L02000008505

M. Arman Publishing, Inc.

P.O. Box 785, Ormond Beach, FL 32175

FILED
2002 APR -8 PM 12: 16
DIVISION OF CORPORATIONS
FALLAHASSEE, FLORIDA

Office Use Only

## CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

| 1   |   |  |
|---|---|--|
| (Corporation Name)  | (Document #)  | 6009052058561<br>-04/08/02-0071-020<br>****130.00 ****130.00 |
| (Corporation Name)  | (Document #)  |  |
| (Corporation Name)  | (Document #)  | ·  |
| 4. (Corporation Name)                                       | (Document #)  | <del></del>  |
| ☐ Walk in ☐ Pick up time                                    |   | Certified Copy   |
| ☐ Mail out ☐ Will wait                                      | ☐ Photocopy   | ☐ Certificate of Status                                      |
| NEW FILINGS   | AMENDMENTS  |  |
| Profit Not for Profit Limited Liability Domestication Other | Amendment Resignation of R. Change of Registe Dissolution/Witho |  |
| OTHER FILINGS   | REGISTRATION/Q  | <u>UALIFICATION</u>  |
| Annual Report Fictitious Name                               | Foreign Limited Partnersh Reinstatement Trademark Other         | i <b>p</b>   |
|   |   | Examiner's Initials  |

CR2E031(7/97)

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| ARTICLE I - Name:  |
|--|
| The name of the Limited Liability Company is:  |
| Yopple, CLC  |
| ARTICLE II - Address:  |
| The mailing address and street address of the principal office of the Limited Liability Company is:  |
| 740 S Kidgewood Ave  |
| 740 S Ridgewood Ave<br>Ormand Beach FL 32174   |
| Of Words Decover & South   |
| ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:   |
| ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:  The name and the Florida street address of the registered agent are:    M. Mae   Parman   The Same   Th |
| The hame and the Florida street address of the registered agent are.   |
| Michael P Arman 35,00 34.  740 S Ridgewood Ave 1876  |
| The C Dame   |
| TO S COOLEMAN YOUR   |
| Florida street address (P.O. Box NOT acceptable)  Orward Beach FL 32 74  |
| City, State, and Zip   |
|  |
| 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  |
|  |
| Michael Parman   |
| Registered Agent's Signature   |
| Autista W. Managament (Charle have if applicable )   |
| 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.  |
| dictorot, a manager manager company.   |
|  |
|  |
| (An additional article must be added if an effective date is requested)  |
| Michael P arman  |
| Signature of a member or an authorized representative of a member.   |
| (In accordance with section 608.408(3), Florida Statutes, the execution  |
| of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)   |
|  |
| Michael P Armon  Typed or printed name of signee   |
| TINET TO KITTING WINDOW ON O'STITE   |
| FILING FEES:   |
| √\$ 100.00 Filing Fee for Articles of Organization   |
| <ul> <li>25.00 Designation of Registered Agent</li> <li>30.00 Certified Copy (OPTIONAL)</li> </ul>   |
| \$ 5.00 Certificate of Status (OPTIONAL)   |