

LO3 0000 21882

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 205-0383

From:

Greg C. Gable, Legal Asst.
Account Name : AKERMAN, SENTERPITT & EIDSON, P.A.
Account Number : 075471001363
Phone : (305) 374-5600
Fax Number : (305) 374-5095

LIMITED LIABILITY COMPANY

YAM, LLC

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$155.00

32794-136912

LO3-21882
[Signature]

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**ARTICLES OF ORGANIZATION
OF
YAM, LLC**

ARTICLE I: - Name

The name of the Limited Liability Company is: **YAM, LLC**

ARTICLE II: - Address

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

2875 N.E. 191 Street, Suite 512
Aventura, Florida 33180

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

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

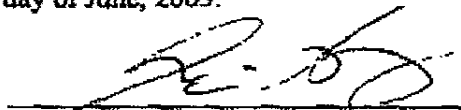
Aviv Tzur
2875 N.E. 191 Street, Suite 512
Aventura, Florida 33180

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.



Aviv Tzur
Registered Agent

Signed and dated this 14 day of June, 2003.



Aviv Tzur
Authorized Representative of a Member

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