L04000001257

* •		
(R	equestor's Name)	
(Ad	ddress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	#)
—	 1	 1
PICK-UP	WAIT	MAIL
(Bu	usiness Entity Name	e)
(Do	ocument Number)	
Certified Copies	Certificates c	of Status
Special Instructions to	Filing Officer:	
	-	
į.		
		1/2/1
		- W-X
	Office Use Only	
		\ \V) -



300027326723

01/21/04--01090--013 **160.00

04 JAN 21 PH 5: 34
SECTABLISADE FLORIDA

	egistration Section Division of Corporations			
SUBJECT		n, LC f Limited Liability Con	nnanvì	
	(Maine O	I Emmiss Emachicy Con	ilperiy)	
The enclos	sed Articles of Organization and fee	(s) are submitted for fil	ing.	
	Please return all corre	espondence concerning	this matter to the following:	Z.S
	Maria Ang	eles Brito		10 pt
		(Name of Ferson)		JAN21
		(Firm/Company)		
	2691 Muscatello		ORI	PH 5: 3
		(Address)		· •••
	Orlando, FL	3?837		
		(City/State and Zip Co	ode)	-
For further	information concerning this matter	, please call:		
MARI	A ANGELES BRITO	at (407	340 0229 & 407 8	356-7653
	(Name of Person)		de & Daytime Telephone Number)	
		jesta.		4 -
		er en	1,	
	STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	bility Company is:	
Y & J Construction	, LC	
ARTICLE II - Address:		·
	et address of the principal office of the Limite	ed Liability Company
Principal Office Address:	Mailing Address	Ot J SECKA ALLAY
2691 Muscatello St	SAME	AS AS
Orlando F1 32837		SEE.
		FLOOI
		100
<u> Maria</u>	Angeles Brito	<u></u> <u></u> .
2691 M	Angeles Brito Name uscatello St. rida street address (P.O. Box NOT acceptable)	··· <u>-</u>
<u>2691 M</u> Flo	Name uscatello St. rida street address (P.O. Box NOT acceptable)	<u>-</u>
2691 M	Name uscatello St. rida street address (P.O. Box NOT acceptable)	
2691 M Fig Orland been named as registered age my at the place designated in the act in this capacity. I further a	Name uscatello St. rida street address (P.O. Box NOT acceptable) o FLORIDA 32837	is registered agent a es relating to the pro tions of my position
2691 M Fig Orland been named as registered age my at the place designated in the act in this capacity. I further a	Name uscatello St. rida street address (P.O. Box NOT acceptable) o FLORIDA 32837 City, State, and Zip nt and to accept service of process for the above is certificate, I hereby accept the appointment agree to comply with the provisions of all statutes, and I am familiar with and accept the obligations.	ns registered agent a es relating to the pro tions of my position

Page 1 of 2 (CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

<u>Title:</u>	Name and Address:	
"MGR" = Manager		
"MGRM" = Managing Member		
Same of the same of		
"MGRM"	Mària Angeles Brito	
	2691 Muscatello St	No.
	Orlando Fl 32837	
	•	
		
		- 1711-1
		<u></u>
		FLO
		:
		A
	,	
		
(The offenhant if account)		
(Use attachment if necessary)		
NOTE: An additional article must be	added if an effective date is reques	ted.
·		
REQUIRED SIGNATURE:	<i>r </i> }	
The In	e P	
(IN WEDDA	70	b -
Signature of a propried or an a	uthorized representative of a member.	•
Signature of a member of an a	dinormed representative of a member.	
(In accordance with section 608	.408(3), Florida Statutes, the execution	
of this document constitutes an a	affirmation under the penalties of perjury	
that the facts stated herein are tre	uc.)	
"MGRM" Maria And	and an Butto	
	geles Brito	

Filing Fees:
\$100.00 Filing Fee for Articles of Organization
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)