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## TRANSMITTAL LETTER

	gistration Section vision of Corporations	
SUBJECT:	YUVA, LLC.	
	(Name of Limited Liability Compa	
The enclosed	d Articles of Organization and fee(s) are submitted for filing	s matter to the following:
	Please return all correspondence concerning this	s matter to the following:
	DRAGUISA GOMERO	
	(Name of Person)	· 23,
		100 C
	YUVA, LLC.	
	(Firm Company)	
1302	2 NE 125 STREET	
	(Address)	
	MIAMI, FLORIDA 33161	
	(City State and Zip Code	<del>)</del>
For further in	nformation concerning this matter, please call:	
DRAGUISA	A GOMERO at ( 786	344-8780
	(Name of Person) (Area Code	& Daytime Telephone Number)

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

ARTICLES OF ORGA FOR	NIZATION			
FLORIDA LIMITED LIABII	LITY COMPANY			
ARTICLE I - Name: The name of the Limited Liability Company is: YUVA, LLC.	NIZATION  LITY COMPANY  office of the Limited Liability Company is:			
ARTICLE II - Address:  The mailing address and street address of the principal office of the Limited Liability Company is:				
Principal Office Address:	Mailing Address:			
1302 NE 125 STREET N.MIAMI, FL 33126	1302 NE 125 STREET N.MIAMI FL 33161			
<u></u>				
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: The name and the Florida street address of the registered agent are:				
DRAGUISA GOMERO				
Name				
1302 NE 125 STREET  Florida street address (P.O. Box N	OT acceptable)			
MIAMI, FI City, State, and Zip	ORIDA 33161			

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, Florida Statutes..

Page 1 of 2

(CONTINUED)

<u>Title:</u>	aging Member(s): ger or Managing Member is as follows:  Name and Address:  DRAGUISA GOMERO  1302 NE 125 STREET MIAMI FL 33161
"MGR" = Manager	The state of the s
"MGRM" = Managing Member	69. 2
MGR	DRAGUISA GOMERO
	1302 NE 125 STREET MIAMI FL 33161
MGRH	wadi bonero
	1302 NE 125 Street
	MUMMI F1. 33166
physical and the statement of the statem	
(Use attachment if necessary)	
NOTE: An additional article must	be added if an effective date is requested.
REQUIRED SIGNATURE:	
	an
Signature of a member or a	in authorized representative of a member.
(In accordance with section of this document constitutes that the facts stated herein ar	608.408(3), Florida Statutes, the execution an affirmation under the penalties of perjury true.)
DRAGUISA GOMERO	

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)

Typed or printed name of signee