

Nov 30 04 04:55p ECFs
Division of Corporations

305 444-4977

64000086358

Florida Department of State
Division of Corporations
Public Access System

11/30

Electronic Filing Cover Sheet

MJH

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.

((H04000236678 3)))

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

RECEIVED

04 NOV 30 PM 4:31

DIVISION OF CORPORATIONS

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

From:

Account Name : EXPRESS CORPORATE FILING SERVICE INC.
Account Number : I20000000146
Phone : (305) 444-4994
Fax Number : (305) 444-4977

STATE OF FLORIDA
TALLAHASSEE

04 NOV 30 PM 5:51

FILED

LIMITED LIABILITY COMPANY

YO LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

Electronic Filing Menu

Corporate Filing

Public Access Help

, (((H04000236678)))

**ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I - Name:

The name of the Limited Liability Company is:

YO LLC**ARTICLE II - Address:**

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

Principal Office Address:

40 Glnsky
169 E Flagler St Ste 1118
Miami FL 33131

Mailing Address:

40 Glnsky
169 E. Flagler St Ste 1118
Miami FL 33131

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

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

Michael Glnsky

Name

169 E. Flagler St Ste 1118Florida street address (P.O. Box **NOT** acceptable)MiamiFLORIDA 33131

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 605, Florida Statutes.


Registered Agent's SignatureFILED
NOV 30 2004
CLERK OF CIRCUIT COURT
IN AND FOR THE STATE
OF FLORIDA

04 NOV 30 PM 5:51

• (((H04000236678)))

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:MGRYRIT DANKSEL - 49%
910 GINSKY 169 E. Flagler St Ste 1118
Miami FL 33131MGRMYAIR DANKSEL - 1%
910 GINSKY 169 E. Flagler St Ste 1118
Miami FL 33131MGROfer Mizrahi - 50%
910 GINSKY 169 E. Flagler St Ste 1118
Miami FL 33131

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.**REQUIRED SIGNATURE:**
Signature of a member or an authorized representative of a member.

(In accordance with section 601.908(3), Florida Statute, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

YAIR DANKSEL

Typed or printed name of signer

File Fee:

Filing Fee for Articles of Organization

Designation of Registered Agent

Certified Copy (Optional)

Certificate of Status (Optional)