# L05000046712

| (Requestor's Name)                      |
|---|
| (Address)                               |
| (Address)                               |
| (City/State/Zip/Phone #)                |
| PICK-UP WAIT MAIL                       |
| (Business Entity Name)                  |
| (Document Number)                       |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
| Office Use Only                         |



500053484825

05/11/05--01047--009 \*\*155.00

OS MAY II MM 7: 32
SECKETARY OF STATE



| CORPDIRECT AGI<br>103 N. MERIDIAN S<br>TALLAHASSEE, FI<br>222-1173 | STREET, LOW  |                                    |  |   |
|--|--------------|------------------------------------|--|---|
| FILING COVER<br>ACCT. #FCA-14                                      | SHEET        |                                    |  |   |
| CONTACT:   | KATIE WO     | <u>ONSCH</u>                       | 4005                                   | _ |
| DATE:  | 05/11/2005   |                                    | 10000000000000000000000000000000000000 | 3 |
| REF. #:  | 000910.379   | <u>06</u>                          |  |   |
| CORP. NAME:  | YGA, LLC     |                                    | A 7: 32 SEE. FLORIDA                   |   |
| ( ) ARTICLES OF INC  | ORPORATION   | ( ) ARTICLES OF AMENDMENT          | ( ) ARTICLES OF DISSOLUTION            |   |
| ( ) ANNUAL REPORT  |              | ( ) TRADEMARK/SERVICE MARK         | ( ) FICTITIOUS NAME                    |   |
| ( ) FOREIGN QUALIFICATION  |              | ( ) LIMITED PARTNERSHIP            | ( XX) LIMITED LIABILITY                |   |
| ( ) REINSTATEMENT  |              | ( ) MERGER                         | ( ) WITHDRAWAL                         |   |
| ( ) CERTIFICATE OF   | CANCELLATION | V                                  |  |   |
| ( ) OTHER:   |              |                                    |  |   |
|  |              |                                    |  |   |
| ATE FEES P.  | REPAID W     | ітн снеск# <u>512533</u> <b>го</b> | PR \$ <u>155.00</u>                    |   |
| AUTHORIZAT   | ION FOR A    | CCOUNT IF TO BE DEBITE             | ED:                                    |   |
|  |              | COST LII                           | MIT: \$                                |   |
| PLEASE RETU  | RN:          |                                    |  |   |
| ( XX ) CERTIFIED C   |              | ( ) CERTIFICATE OF GOOD STAN       | DING ( ) PLAIN STAMPED COPY            | _ |
|  |              |                                    |  |   |

Examiner's Initials

#### **ARTICLES OF ORGANIZATION**

Wilder Control of States

YGA, LLC a Florida limited liability company

### ARTICLE I

The business and affairs of the Limited Liability Company shall be conducted under the name of:

YGA, LLC

### ARTICLE II PRINCIPAL OFFICE

The street address and the mailing address of the principal place of business of the Limited Liability Company shall be:

P. O. Box 21695 Sarasota, FL 34276

### ARTICLE III INITIAL REGISTERED AGENT/OFFICE

The registered office of the Limited Liability Company and its initial registered agent shall be:

Yaron Devald 7400 S. Gator Creek Blvd. Sarasota, Florida 34241

## ARTICLE IV MANAGEMENT AND POWERS

The business and affairs of the Limited Liability Company shall be managed by one or more Managers elected as provided in the Regulations or Operating Agreement of the Limited Liability Company.

| IN WITNESS WHEREOF, the | ese Articles of Organization have been executed as of the, 2005. |
|-------------------------|--|
|                         | By: Affall   |
|                         | Yaron Devald  Authorized Representative"                         |

F:\data\(Manlym\YGA, LLC Articles.wpd

### CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 608.415 of the Florida Statutes, the undersigned Limited Liability Company submits the following statement to designate a registered office and registered agent in the State of Florida.

1. The name of the Limited Liability Company is:

YGA, LLC

2. The name and the Florida street address of the registered agent is:

Yaron Devald 7400 S. Gator Creek Blvd. Sarasota, FL 34241

Having been named 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

3y \_\_\_\_\_\_\_\_

Yaron Devald

'REGISTERED AGENT'