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## Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number

: (850)205-0383

Account Name

: XIOMARA LEE, P.A.

Account Number: 120040000008

: (305)262-2323

Fax Number

: (305)262-2324

## LIMITED LIABILITY COMPANY

#### J & Y INVESTMENTS LLC

| Certificate of Status | 1        |
|-----------------------|----------|
| Certified Copy        | 1        |
| Page Count            | 02       |
| Estimated Charge      | \$160,00 |

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# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

|                                 | J&`   | INVESTMENTS LLC  |
|---------------------------------|---|--|
| ARTICLE II -<br>The mailing add |   | the principal office of the Limited Liability Compa  |
| rincipal Offic                  | e Address:  | Mailing Address:   |
| 483 SW 24TH S                   | T SUITE 101   | 7483 SW 24TH ST SUITE 101  |
|                                 |   |  |
| ARTICLE III                     |   | MIAMI, FL 33155  stered Office, & Registered Agent's Signature:  f the registered agent are:   |
| ARTICLE III                     | - Registered Agent, Reg<br>he Florida street address (                    | stered Office, & Registered Agent's Signature:<br>The registered agent are:  |
| ARTICLE III                     | - Registered Agent, Reg<br>he Florida street address (                    | stered Office, & Registered Agent's Signature: I the registered agent are:   |
| ARTICLE III                     | - Registered Agent, Reg<br>he Florida street address o                    | stered Office, & Registered Agent's Signature: It the registered agent are: ITA YEE Name TH ST SUITE 101                               |
|                                 | - Registered Agent, Reg<br>he Florida street address o<br>MA<br>7483 SW 2 | Attered Office, & Registered Agent's Signature: If the registered agent are: ITA YEE Name TH ST SUITE 101 ES (P.O. Box NOT acceptable) |
| ARTICLE III                     | - Registered Agent, Reg<br>he Florida street address o<br>MA<br>7483 SW 2 | etered Office, & Registered Agent's Signature: If the registered agent are: ITA YEE Name TH ST SUITE 101                               |

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.

Region Agent's Signature

Page 1 of 2 (CONTINUED)

((H050001871723))

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

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

| Title:   | Name and Address:  |
|--|--|
| "MGR" = Manager  |  |
| "MGRM" = Managing Member   |  |
| MGR  | MARTA YEE  |
|  | 7483 SW 24TH ST SUITE 101  |
| 3  | MIAMI, FL 33155  |
| MGR  | JAIME YEE  |
| In the second se | 7483 SW 24TH ST SUITE 101  |
|  | MIAMI, FL 33155  |
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| (Use attachment if necessary)  | ;  |
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|  |  |
| Michigan A. San  |  |
| NOIE: An additional afficie must   | be added if an effective date is requested.  |
| REQUIRED SIGNATURE: 777  | 0  |
|  |  |
| 4-1117   |  |
| Signature of a fremoter of a   | n authorized representative of a memori  |
| (In accordance with section of<br>of this document constitutes a<br>that the facts stated herein are   | 08.408(3), Florida Statutes, the execution<br>a affirmation under the penalties of perjury<br>frue.) |
| MAR  | TA YEE   |
|  | printed name of signee   |
|  |  |
|  |  |

05 AUG -5 AH 8: LO