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SECRETARY OF STATE

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APPROVED

COVER LETTER

TO: Registration Se Division of Co			
SUBJECT:	Young Holding (Name of Limite)	Liability Company)	LLC
The enclosed Articles o	f Organization and fee(s) are so	ubmitted for filing.	
Please return all corresp	ondence concerning this matte	er to the following:	
	BRIAN T	Name of Person)	
	Young Hold	inals of Tan Firm/Company)	pa, LLC
	1434 Hupler	Pond Ln	
	VAIRICO F	Florida 335	594
For further information	concerning this matter, please	call:	
	•	at (<u>\$13</u>) <u>65</u> (Area Code & Daytime To	7-1034 elephone Number)
Enclosed is a check for	or the following amount:		
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Addres Registration Section Division of Corporatio Clifton Building 2661 Executive Center Tallahassee, FL 32301	ns

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	ORIDA LIMITED LIABILITY COMPANY
ARTICLE I - Name: The name of the Limited Liability Company is:	TOLOLO
Young Holding's (Must end with the words "Limited Liability Company, Limited	Of Tampa LLC 1 Company" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address: The mailing address and street address of the print	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1434 Hueley Pond LN Valeico, FC 33594	1434 Hurley Ruo LN VAlrico, FC 33594
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registe business entity with an active Florida registration.)	Office, & Registered Agent's Signature: red Agent. You must designate an individual or another
The name and the Florida street address of the re	gistered agent are:
BRIAN D. Name	YOUNG
1434 Hupley Florida street addr	POND LN ess (P.O. Box <u>NOT</u> acceptable)
VAIRICO City. State, an	FL 33594 nd Zip
	ccept service of process for the above stated limited is certificate. I hereby accept the appointment as

ted 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, F.S..

Registered Agent's Signatu

(CONTINUED) Page 1 of 2

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

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

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	Jennifer A. Young 1434 Hurley Pond LN Valrico, FL 33594
<u> </u>	

(Use attachment if necessary)

REQUIRED SIGNATURE:

Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

BRIAN D. Young

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

SECRETARY OF STATE