

Florida Department of State

Division of Corporations Public Access System

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Division of Corporations

Fax Number : (850) 617-6383

From:

: EXPRESS CORPORATE FILING SERVICE INC. Account Name

Account Number: I2000000146 : (305)444-4994 Phone

Fax Number : (305)444-4977

ORIDA/FOREIGN LIMITED LIABILITY CO.

YAM MACHINE SHOP AND IRON WORK LLC

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

D. BRUCE

JAN 26 2009

EXAMINER

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Corporate Filing Menu

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LLC

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Library Company 18:				
YAM	MACHINE	SHOP	AND	IRON WORK
YAM MACHINE SHOP AND TRON WORK (Must end with the words "Limited Liability Company, "LLC," or "LLC.")				

ARTICLE II - Address:

ARTICLE I - Name:

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

Principal Office Address:

1155 West 775 ST # 2291

Mailing Address:

1155 Worf 77#ST # 229D

HIALEHH FL 33014

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature; (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or ampthembusiness earlity with an active Florida registration.)

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

YOBANY ABREU

Florida street address (P.O. Box NOT acceptable)

HIALEAIL FL 33014
City, State, and Zip

Having been named us 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, F.S..

Registered agent's Signature (REQUIRED)

(CONTINUED)
Page 1 of 2

EFFECTIVE DATE 2/1/07

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Title: "MGR" - Manager "MGRM" - Managing Member	Name and Address:
M.G.R. M	YOBANY ABREU 1155 W 77 ST #229 D HIALEMI FL 33014
MGRM	YORDAN BARRARO 1155 W 77 ST # 229 D HIALEAH FL 33014
(Use attachment if necessary) ARTICLE V: Effective date, if other than the (If an effective date is listed, the date must to or 90 days after the date of filing.)	ne date of filing: <u>02-0/-2009</u> . (OPTIONAL) be specific and cannot be more than five business days prior
REQUIRED SIGNATURE:	
Lakary	Obrew ber or an authorized representative of a member.
(In accordance with s	ection 608.408(3), Florida Statutes, the execution stitutes an affirmation under the penalties of perjury
YOBAN	Young or printed name of sience

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

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

O9 JAN 23 AM 10: 11
SECRETARY OF STATE

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)

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