Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850) 617-6383

From:

Account Name

: BLUMBERG/EXCELSIOR CORPORATE

Account Number : 075350000353 Phone

: (212) 431-5000

Fax Number

: (212)431-1441

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

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Rma:	1	Address:	

## FLORIDA LIMITED LIABILITY CO. YUMIBOB, LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$125.00

A. LUNT

-APR-**29** 2010

Electronic Filing Menu

Corporate Filing Menu

4/28/2010

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

AR	TICI	RI.	Name:

The name of the Limited Liability Company is:

YUMIBOB, LLC		3.,	~	•
(Must end with the words "Limit	ed Liability Company, "L.L.C.," or "LLC.")		2010	
ARTICLE II - Address:		LUAHA	APR	П
The mailing address and street address of	f the principal office of the Limited Li		npany	is:
Principal Office Address:	Mailing Address:	があれ	AH	m
C/O MYRA SHULKES		E STA	藥	
5865 SW 32 TERRACE, SUITE #1		Ç ri	S	
FORT LAUDERDALE, FL 33312				

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Lizbility Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

5865 SW 32 TERRACE, SUITE #1

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

FORT LAUDERDALE<sub>FL</sub>33312
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 608, F.S.



(CONTINUED) Page 1 of 2

<u>Title:</u>	Name and Address:	EC.	
"MGR" = Manager		至行	=
"MGRM" = Managing Member		A S	ŗ
MGRM	MONTE SHULKES	Me	
	137-75 70TH ROAD	. '77	=
	FLUSHING, NY 11367	55	ā
MGRM	SERGE EYSMONT-NEROSLAVSKY	ATE A	Ċ
**************************************	727 OCEANVIEW AVENUE	•	•
	BROOKLYN, NY 11235		
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Fax:888-692-9256

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)