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(Re	equestor's Name)	
(Ac	Idress)	
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(Ci	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	e) ·
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
W10-4	11068	

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TILED

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SEURETARY OF STATE
TALLAHASSEF FINALE

D. BRUCE

OCT 27 2010

EXAMINER



FLORIDA DEPARTMENT OF STATE Division of Corporations

August 31, 2010

YEYSON JIMENEZ 917 N. 21ST AVENUE HOLLYWOOD, FL 33020

SUBJECT: YEYSON JIMENEZ GENERAL AUTO SHOP, LLC

Ref. Number: W10000041068

We have received your document for YEYSON JIMENEZ GENERAL AUTO SHOP, LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to section 608.409(2), F.S., the effective date must be specific, cannot be more than five business days prior to the date of filing or more than 90 days after the date of filing. Our office received your document on August 30, 2010. Please amend your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6984.

Deborah Bruce Regulatory Specialist II

Letter Number: 610A00020834

FILED

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SECRETARY OF STATE

COVER LETTER

то:	Registration S Division of Co							
SUBJ	ECT: YEYSO	N JIMENEZ GENERA						
		Name of Limit	ted Liability Con	ıpany				
The er	nclosed Articles of	of Organization and fee(s) are	submitted for fil	ing.				
Please	return all corresp	pondence concerning this mat	ter to the following	ing:				
	YEYSON JIM	MENEZ						
			Name of Person					
	YEYSON JIM	IENEZ GENERAL AUTO	SHOP. LLC					-
			Firm/Company					
	917 N. 21ST	AVENUE						
	- 		Address					
	HOLLYWOO	D, FLORIDA 33020			<u> </u>	(<u>(</u>	10	
		Cir	ty/State and Zip Co	ode	₽	で - 268 - 171	AUG 3D	,
	yeyjason@ho	tmail.com			$\frac{1}{\lambda}$) <u></u>	ω 	
		E-mail address: (to be used	for future annual r	eport notification)	L.A.	~~		- }
For fu	rther information	concerning this matter, pleas	e call:		· ·	207	Ť.	
FMII	.IA MENDOZA		_ at (_954	,709-4386	, 0,71	ZZ.	PH 2: 47	•
		of Person		ode & Daytime Tele	phone Number	2131		
Enclo	sed is a check for	or the following amount:						
□\$125	0.00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	S155.00 Fi Certified ((additional c		\$160.00 Filing Certificate of Certified Copy (additional copy	Status y	s &	
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registr Divisio Cliftor 2661 E	Courier Address ration Section on of Corporations Building Executive Center Cassee, FL 32301				

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company	y 1S:				
YEYSON JIMENEZ GENERAL AUT	O SHOP, LLC				
(Must end with the words "Limited I	Liability Company, "L.L.C.," or "LLC.")				
ARTICLE II - Address:					
The mailing address and street address of the	ne principal office of the Limited Lia	bility Compar	y is:		
Principal Office Address:	Mailing Address:				
917 N. 21st Avenue	917 N. 21st Avenue				
Hollywood, Florida 33020	Hollywood, Florida 33020				
ARTICLE III - Registered Agent, Registered Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of the YEYSON JIMENEZ	Registered Agent. You must designate an individ	dual or another			
	lame	AUG 30 CRETARY LAHASSE			
917 N. 21st AVENUE		30 PM 2: 47 TARY OF STATE ASSEE, FLORID			

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..

Registered Agent's Signature (REQUIRED)

(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: Name and Address: Title: "MGR" = Manager "MGRM" = Managing Member MGRM YEYSON JIMENEZ 917 N. 21st AVENUE HOLLYWOOD, FLORIDA 33020 (Use attachment if necessary) **ARTICLE V:** Effective date, if other than the date of filing: _____ (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.) **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

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)

that the facts stated herein are true.)

YEYSON JIMENEZ

Typed or printed name of signee