# 11000/37743

(Re	equestor's Name)	
. (Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Name	e)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		

Office Use Only



900214618939

12/07/11--01023--007 \*\*620.00

FILED

OF STATE

CRETARY OF STATE

LLAHASSEE, FLORIDA

RECEIVED RECEIVED

OF STATE

LLAHASSEE, FLORIDA

RECEIVED RECEIVED

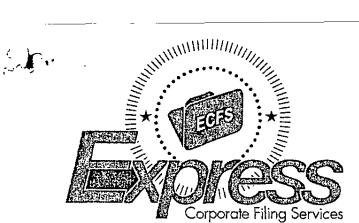
OF STATE

TO ACKNOWLEDGE WAS ACKNOW

J. BRYAN

DEC -7 2011

**EXAMINE** 



1000 Ponce de Leon Blvd. Suite: 101 Coral Gables, FL 33134

Phone: 305 444 4994

Email-filing@ecfsfiling.com



OFFICE USE ONLY

### CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

. Yajadala Med	luc	
(Corporation Name)	(Document #)	
(Corporation Nama)	(Document #)	
(Corporation Name)	(Document #)	
(Corporation Name)	(Document #)	
Walk in Pick up time	Certified Copy	
Mail out Will wait	Photocopy Certificate of Status	
NEW FILINGS	AMENDMENTS	
Profit	Amendment	
NonPrefit	Resignation of R.A., Officer/ Director	
Limited Liability	Change of Registered Agent	
Domestication	Dissolution/Withdrawal	
Other	Метдет	

OTHER FILNGS
Annual Report
Fictitious Name
Name Reservation

REGISTRATION/ QUALIFICATION
Foreign
Limited Partnership
Reinstatement
Trademark ·
Other

Examiner's Initials

## ARTICLES OF ORGANIZATION OF YAJADALA MED LLC

THE UNDERSIGNED, as a member or an authorized representative of a member of the Company, pursuant to to Chapter 608, Florida Statutes, files the following Articles of Organization establishing a Florida Limited Liability Company named

YAJADALA MED LLC

#### ARTICLE\_I

The name of the Limited Liability Company is:

#### YAJADALA MED LLC

#### ARTICLE II

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

The mailing address shall be: 17913 NW 7th Street #103 Pembroke Pines, FL 33029

The principal address shall be: 7401 Wiles Rd, Suite 213-216 Coral Springs, FL 33067

#### ARTICLE III

This Limited Liability Company is organized to do any and all of the things herein mentioned, as fully and to the same extent as natural persons might do, viz:

Transact any and all lawful business in the United States and abroad.

#### ARTICLE IV

The period of duration for the Limited Liability Company shall be perpetual.

#### ARTICLE V

The Limited Liability Company shall be managed by one or more managers and is therefore a manager-managed company. The initial members of the Company shall be three (3) to hold office until their successor (s) have been duly elected and qualified, or until their earlier resignation, removal from office or death. The number of Managers may increase or decrease in accordance with the procedure stated in the By-Laws of the Company.

The name and addresses of the Manager and/or Managing Members are:

AMORE THE PRIZE OF MGRM: Leonardo Izaguirre: 7401 Wiles Rd, Suite 213-216. Coral Springs, Fl 33067

MGRM: Carmen Rodriguez: 7401 Wiles Rd, Suite 213-216. Coral Springs, Fl 33067

MGRM: Reinaldo Lopez: 7401 Wiles Rd, Suite 213-216. Coral Springs, Fl 33067

#### ARTICLE VI

The name and Florida street address of the Limited Liability Company's registered agent are:

**CPC** Accounting Services 17913 NW 7th Street Suite 103 Pembroke Pines, FL 33029

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 appointement 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.

Elsa C. Rios

Date: November 29, 2011

IN WITNESS WHEREOF, the undersigned member or authorized representative of a member has signed these Articles of Organization this 29 of November of 2011.

ure of Managing Member

REINALDO LOPEZ

Signature of Member or Authorized Representative of a Member