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EXAMINER
DEC 15 2011

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: YONYOSE, LLC
Name of Limited Liability Company
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Jahanara Irons
Name of Person
ronrose, LLC
415 Vizcaya Ct
Address
Melbourne, FL 32940 City/State and Zip Code
iron rose company @ gmail. com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Jahanara Irons at (321) 622-4589 Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\ \text{Certificate of Status} \] \$155.00 Filing Fee & \text{Certified Copy} \\ \text{(additional copy is enclosed)} \] \$160.00 Filing Fee, \text{Certified Copy} \\ \text{Certified Copy} \\ \text{(additional copy is enclosed)} \]
Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 8 50 24 5 6051 Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is	ETECTIVE .
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Ironrose, LLC	The Committee of the Co
(Must end with the words "Limited Liab	Ility Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the p	rincipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
415 Vizcaya Ct. Mel bourne Fl 32940	415 Vizaqya Ct. Melbourne Fl 32940
ARTICLE III - Registered Agent, Registere (The Limited Liability Company cannot serve as its own Regibusiness entity with an active Florida registration.)	d Office, & Registered Agent's Signature: stered Agent. You must designate an individual or another
The name and the Florida street address of the	registered agent are:
Jahanara	Irons EG 3
Name	
415 Vizcaya	Ct. SS F E
	Idress (P.O. Box NOT acceptable)
Melbourne	70010
City, S	FL DZ940 SE State, and Zip
Having been named as registered agent and to liability company at the place designated in registered agent and agree to act in this capaci statutes relating to the proper and complete p	accept service of process for the above stated limited this certificate, I hereby accept the appointment as ty. I further agree to comply with the provisions of all erformance of my duties, and I am familiar with and istered agent as provided for in Chapter 608, F.S
Dahamin	Lins.
Registered Agent's Signa	iture (REQUIRED)

(CONTINUED)

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

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

Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR	Jahancura Irons 415 Vizcaya Ct Melbourne, FL 32940
(Use attachment if necessary)	
	In the date of filing: $1/1/2$. (OPTIONAL) ust be specific and cannot be more than five business days prior
REQUIRED SIGNATURE:	
Signature of a m	UNATA SUONS ember or an authorized representative of a member.
(In accordance with section constitutes an affirmation I am aware that any false	n 608.408(3), Florida Statutes, the execution of this document under the penalties of perjury that the facts stated herein are true. Information submitted in a document to the Department of State

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)

JAHANARA IRONS

Typed or printed name of signee