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ALLAHASSEF E STATE

Registration Section Division of Corporations

YOUNG PIONEERS, 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:

ANDREY ROSSIN

Name of Person

YOUNG PIONEERS, LLC

Firm/Company

200 172ND STREET #510

Address

SUNNY ISLES, FLORIDA 33160

City/State and Zip Code

247deal@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ANDREY ROSSIN

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

■\$125.00 Filing Fee

□\$130.00 Filing Fee & Certificate of Status

□\$155.00 Filing Fee & Certified Copy (additional copy is enclosed) □ \$160.00 Filing Fee, Certificate of Status & Certified Copy

(additional copy is enclosed)

Mailing Address

Registration Section **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

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:	•
YOUNG PIONEERS, LLC	·	1100 G WIGN WIGN	
(Must end	with the words "Limited L	.iability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address			•
The mailing address and	street address of the	e principal office of the Limited I	Liability Company is:
Principal Office Addre	ss:	Mailing Address:	
200 172ND STREET #510		SAME	
SUNNY ISLES, FLORIDA	33160		
	···		
business entity with an active F The name and the Florid	lorida registration.)	egistered Agent. You must designate an ind	
	Name		ZOI3 HAR SECRETA
200 1	72ND STREET, #510	0	HAS:
		t address (P.O. Box NOT acceptable)	SEE ao
SUN	NY ISLES	_{FL} 33160	
	City	, State, and Zip	
liability company at t	he place designated	to accept service of process for the in this certificate, I hereby accept pacity. I further agree to comply	the appointment as
-		plete performance of my duties, ar	-
and accept the obligation	ons of my positio <mark>j</mark> i as	s registered agent as provided for	in Chapter 608, F.S
	1		
	Registered Agent's Si	gnature (REOLURED)	

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:

<u>Title:</u> "MGR" = Manager	Name and Address:	
"MGRM" = Managing Member		2013 MAR SECRE
MGR	ALEXANDER ROSSIN	至
-	2179 NE 179TH STREET	15 A 6
	NORTH MIAMI BEACH, FL 33162	ARY OF
		77.0
		77.2
		
		
		
ARTICLE V: Effective date, if other than the (If an effective date is listed, the date must prior to or 90 days after the date of filing.)	e date of filing: t be specific and cannot be more tha	(OPTIONAL) in five business days
REQUIRED SIGNATURE:		
Signature of a member	f or an authorized representative of a mem	 ber.
(In accordance with section 608 constitutes an affirmation under I am aware that any false inform	3.408(3), Florida Statutes, the execution of this the penalties of perjury that the facts stated he nation submitted in a document to the Departmy as provided for in s.817.155, F.S.)	document rein are true.
ANDREY ROSSIN	·	
Ту	ped or printed name of signee	
Filing Foos		

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)