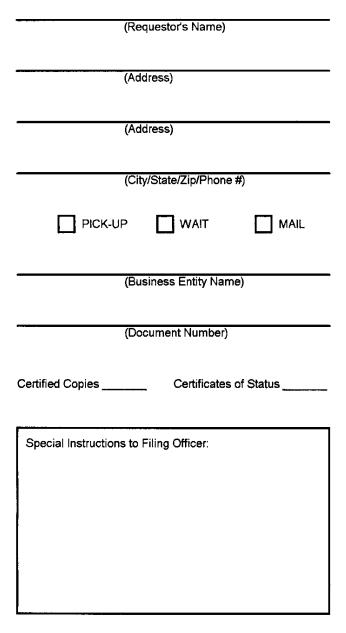
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Office Use Only



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FLORIDA DEPARTMENT OF STATE Division of Corporations

August 14, 2013

WILLIAM A. DEAN 2875 N.E. 191 STREET SUITE 600 AVENTURA, FL 33180

The Articles of Organization for YAMA3186B313, LLC. were filed on August 12, 2013, and assigned document number L13000114733. Please refer to this number whenever corresponding with this office.

To maintain "active" status with the Division of Corporations, an annual report must be filed yearly between January 1st and May 1st beginning in the year following the file date or effective date indicated above. If the annual report is not filed by May 1st, a \$400 late fee will be added. It is your responsibility to remember to file your annual report in a timely manner.

A Federal Employer Identification Number (FEI/EIN) will be required when this report is filed. Contact the IRS at 1-800-829-4933 for an SS-4 form or go to www.irs.gov.

Please be aware if the limited liability company address changes, it is the responsibility of the limited liability company to notify this office.

Should you have any questions regarding this matter, please contact this office at the address given below.

Agnes Lunt
Regulatory Specialist II
Registration/Qualification Section
Division of Corporations

Letter Number: 013A00019454

COVER LETTER

TO:

Registration Section Division of Corporations

ECT: YAMA3186B313, LLC

(Name of Limited Liability Company)

The enclosed Articles of Dissolution and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

| William A. Dean | | | | | |
|---------------------------------|--|--|--|--|--|
| (Name of Person) | | | | | |
| | | | | | |
| (Firm/Company) | | | | | |
| 2875 N.E. 191 Street, Suite 600 | | | | | |
| (Address) | | | | | |
| Aventura, FL 33180 | | | | | |

(City/State and Zip Code)

For further information concerning this matter, please call:

| William A. Dean | _{at} 305 | ຸ 670-2000 ຼູ | | |
|---|--|---|--|--|
| (Name of Person) | (Area Code & Daytime Telephone Number) | | | |
| Enclosed is a check for the following amount: | | AUG - | | |
| ■ \$25.00 Filing Fee and Certificate of Dissolution | ☐ \$55.00 Filing Certified Co | Fee, Certificate of Dissolution & py (additional copy, is enclosed) | | |
| | | | | |
| MAILING ADDRESS: | STRE | ET/COURIER ADDRESS: | | |

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

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

| 1. | The name of a limited liabi YAMA3186B313, LLC | lity company is | | | | | | |
|-----------|---|--|---|--------------------------|-----------|--|--|--|
| 2. | The Articles of Organization | on were filed on August | 12, 2013 | and assigned | | | | |
| | document number L130001 | 14733 | _ | | | | | |
| 3. | The delayed effective date the dissolution if not effective on the date of filing: (effective date cannot be prior to or more than 90 days later than date document is received for filing) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not b listed as the document's effective date on the Department of State's records. | | | | | | | |
| 4. | A description of occurrence 605.0707, Florida Statutes, | e that resulted in the lim (copy 605.0707 on back | ited liability company's cover letter). | s dissolution pursuant (| o section | | | |
| | All debts, obligations and liab | ` | • | d or discharged | | | | |
| | | | | 21. | | | | |
| 5. | If there are no members, en | | s of the person appoint | ed to wind up the my | oany's | | | |
| | activities and affairs: | William A. Dean | | | | | | |
| | | 2875 N.E. 191 Street, S | Suite 600 | -8 SSET | | | | |
| · | | Aventura, FL 33180 | | P F O | <u> </u> | | | |
| | | | | 0. 19 | | | | |
| 6. lis | Signature of an authorized ted above to wind up the con | person or if there are no mpany's activities and a | members, the signatur ffairs: | e of the person appoint | ed and | | | |
| | | | | | | | | |
| | \sim | | William A. Dean | | | | | |
| Signature | | <u> </u> | Prin | ited Name | | | | |

FILING FEE: \$25.00