

JAN/10/2014/FRI 09:19

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Florida Department of State

Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations
Fax Number : (850) 617-6393

EFFECTIVE DATE 01-08-14

From:

Account Name : EXPRESS CORPORATE FILING SERVICE INC.
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RECEIVED

14 JAN 10 PM 2:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA LIMITED LIABILITY CO.

YLUSION ENTERPRISES LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

B. BOSTICK

JAN 13 2014

FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

YLUISION ENTERPRISES LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:

9058 S.W. 157 AVE
MIAMI FL 33196

Mailing Address:

9058 S.W. 157 AVE
MIAMI FL 33196

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

ANDRICKSON VASQUEZ

Name

9058 S.W. 157 AVEFlorida street address (P.O. Box NOT acceptable)Miami FL 33196

City

Zip

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 605, F.S.

Andrackson Vasquez
Registered Agent's Signature (REQUIRED)

(CONTINUED)

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FAX No.

P. 004

ARTICLE IV.

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:

"AMBR" = Authorized Member
"MGR" = Manager
MGR

Name and Address:

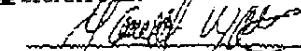
YANETH VASQUEZ
905F S. WILSON ST AVE
MIAMI FL 33196

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 1/8/2014 (OPTIONAL)
(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.)

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member.
(In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.
I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

YANETH VA

Typed or printed name of signee

2014 JAN 10 AM 09:59
[Redacted]

2014 JAN 10 AM 09:59
[Redacted]

JAN/10/2014/FRI 09:59 AM

850-617-6381

FAX No.

P. 001

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January 10, 2014

FLORIDA DEPARTMENT OF STATE
Division of Corporations
EXPRESS CORPORATE FILING SERVICE INC.

SUBJECT: YLUSION ENTERPRISES, LLC
REF: W14000001892

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

You must insert the letters "MGRM" beside the name and address of each managing member and/or the letters "MGR" beside the name and address of each manager listed in the document.

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) 245-6051.

Barbara Bostick
Regulatory Specialist II

FAX Aud. #: H14000006451
Letter Number: 214A00000662

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TALLAHASSEE, FLORIDA

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