91 P.001/003

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : BLUMBERG/EXCELSIOR CORPORATE SERVICES, INC.

Account Number: 075350000353 : (800)221-2972 Fax Number : (888)692-9256

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address:

FLORIDA LIMITED LIABILITY CO. Yahav Enterprises LLC

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

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Corporate Filing Menu

Help

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPAN

ARTICLES OF ORGANIZATION I	FOR FLORIDA LIMITED LIABILITY COMPANY	19 m
ARTICLE I - Name:		M. 3.
The name of the Limited Liability Company is:		75
		92
Yahay Enterprises LLC		_ <u> </u>
(Must end with the words "Lir	mited Liability Company, "L.L.C.," or "LLC.")	— <i>v</i>
ARTICLE II - Address:		
The mailing address and street address of the princi	ipal office of the Limited Liability Company is:	
Principal Office Address:	Mailing Address:	
961 Teaneck Road	961 Teaneck Road	
Teaneck, New Jersey 07666	Teaneck, New Jersey 07666	
The name and the Florida street address of the regis Guy Malul N	stered agent are:	
5225 Collins Avenue, Ur	nit 1616	
Florida street address (P.O		
Miami Beach	FL 33140	
City	Zip	
capacity. I further agree to comply with the provis	ept service of process for the above stated limited lia accept the appointment as registered agent and agri- sions of all statutes relating to the proper and comp. he obligations of my position as registered agent as chapter 605, F.S.	ee to act in this lete performance
Registered Agent's S	MAINE CO.	
rangement of the state of the s	Signature (REOURED)	
	Signature (REQUIRED)	<i>:</i> .
	Signature (REQUIRED)	

Page 1 of 2

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
AMBR	Guv Malui
	5225 Collins Avenue, Unit 1616
	Miami Beach, Florida 33140
AMER	Dorit Cohen 961 Teaneck Road
	Teaneck, New Jersey
ective date is listed, the date must be sp	of filing: Upon filing
EV: Effective date, if other than the date feetive date is listed, the date must be spoof filing.)	of filing: <u>Upon filing</u> . (OPTIONAL) ecific and cannot be more than five business days prior to or
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E V: Effective date, if other than the date ective date is listed, the date must be spot filing.) E VI: Other provisions, if any. REOURED SIGNATURE: Signature of a me (In accordance with section 60 constitutes an affirmation under the section for the	entific and caunot be more than tive business days prior to or more or an authorized representative of a member. 15.0203 (1) (b), Florida Statutes, the execution of this document or the penalties of periury that the facts stated herein are true.
E V: Effective date, if other than the date entire date is listed, the date must be spot filing.) E VI: Other provisions, if any. REOURED SIGNATURE: Signature of a me (In accordance with section 6d constitutes an affirmation under 1 am aware that any false infor	enthic and caunot be more than five business days prior to or mber or an authorized representative of a member. 15.0203 (1) (b), Florida Statutes, the execution of this document or the penalties of perjury that the facts stated herein are true. mation submitted in a document to the Department of State
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