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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.

(((H14000231706 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : CORP USA

Account Number: 072450003255

Phone : (305)634-3694

Fax Number

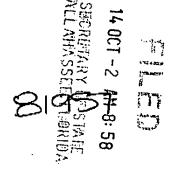
: (786)409-5946

**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. YVES AUTO SALE CENTER LLC

Certificate of Status	1
Certified Copy	0
Page Count	04
Estimated Charge	\$130.00



Electronic Filing Menu

Corporate Filing Menu

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41400031700

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Yvec Att to Sale Center LL C 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:
Tyes Mittant Sx
Name of Person
Firm/Company
7991 North Miami Blue
Address
Miami, Fl 33150
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person at (954) 732 83 96 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
S125.00 Filing Fee & S155.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) S160.00 Filing Fee, Certified Copy (additional copy is enclosed)
Mailing Address Street/Courier Address

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
Tallabussee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:
Yves Auto Sale Center 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: Mailing Address:
Mani El 33150 Ave SOS NE 1945+
Miami, El 33150 Mach Maconi, Fr
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;
Tues Mittord De Name 405 NE 1445t
Name
405 NE 19951
Florida street address (P.O. Box NOT acceptable)
Michael FI. 33/6/
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 603, F.S
Bagistered Agent's Signature (RI/O) (RED)
(CONTINUED)
Page 1 of 2 AM 8: 58 SSEE FLERIDA
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1143 7330	Name and Address:
"AMBR" = Authorized Member "MGR" = Manager	~4
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	Na Miamieth 33/6/
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Use attachment if necessary)	
E VI: Other provisions, if any. REQUIRED SIGNATURE:	
Signature: Signature of a member (In accordance with section 605.0 constitutes an affirmation under I am aware that any false inform	or an authorized representative of a member. 203 (1) (5), Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true, ation submitted in a document to the Department of State
Signature: Signature of a member (In accordance with section 605.0 constitutes an affirmation under I am aware that any false inform constitutes a third degree felony	1203 (1) (5), Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true. ation submitted in a document to the Department of State as provided for in s. 817.155, F.S.)
Signature: Signature of a member (In accordance with section 605.0 constitutes an affirmation under I am aware that any false inform constitutes a third degree felony	1203 (1) (5), Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true. ation submitted in a document to the Department of State as provided for in s. 817.155, F.S.)
Signature: Signature of a member (In accordance with section 605.0 constitutes an affirmation under I am aware that any false inform constitutes a third degree felony	7203 (1) (5), Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true. ation submitted in a document to the Department of State
Signature: Signature of a member (In accordance with section 605.0 constitutes an affirmation under I am aware that any false inform constitutes a third degree felony	203 (1) (5), Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true, ation submitted in a document to the Department of State as provided for in s.817.155, F.S.)
Signature: Signature of a member (In accordance with section 605.0 constitutes an affirmation under I am aware that any false information together the section of the sect	203 (1) (5), Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true, ation submitted in a document to the Department of State as provided for in s. 817.155, F.S.) The ped or printed name of signee Filing Fees:
Signature of a member (In accordance with section 605.0 constitutes an affirmation under I am aware that any false information constitutes a third degree felony Here M Ty: \$125.00 Filing Fee for Articles of Organiz \$30.00 Certified Copy (Optional)	203 (1) (5), Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true, ation submitted in a document to the Department of State as provided for in s.817.155, F.S.)
Signature of a member of a mem	203 (1) (5), Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true, ation submitted in a document to the Department of State as provided for in s. 817.155, F.S.) The ped or printed name of signee Filing Fees: