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FLORIDA DEPARTMENT OF STATIERY O Division of Corporation & LLAHASSEE, WIDA

March 9, 2016

JIAWEN GUAN 15001 CARIBOU CT, APT 102 LUTZ, FL 33559

Upon receipt of your letter and/or check(s) totaling \$130.00, no document was found. Please send your document with any fees due to:

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

Please return a copy of this letter to ensure your money is properly credited.

Please return your check with a note stating what the money is intended for.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Stacy Prather Regulatory Specialist III

Letter Number: 716A00004892

www.sunbiz.org

District of Community D.O. DOV 0207 Mallahaman Filmida 2021

COVER LETTER

	egistration Section ivision of Corporations	
SUBJECT	Yang Cong LLC	
SUBJECT		Limited Liability Company
The enclose	ed Articles of Organization and fee(s) are submitted for filing.
Please retu	rn all correspondence concerning thi	s matter to the following:
	Jia Wen Guan	
		Name of Person
	Yang Cong LLC	
		Firm/Company
	12615 N. 56th St.	
		Address
	Tampa FL 33617	
	401072000	City/State and Zip Code
_	491872800@qq.com E-mail address: (to be	used for future annual report notification)
For further in	nformation concerning this matter, p	·
	Jia Wen Guan	772 812-1649
	Name of Person	Area Code Daytime Telephone Number
Enclosed is	s a check for the following amount:	
\$125.00 Fi	siling Fee \$130.00 Filing Fee Certificate of Status	\$\frac{1}{2}\$\$\frac{1}{2}\$
	Mailing Address New Filing Section Division of Corporations	Street Address New Filing Section Division of Corporations

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

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE II - Address:	nd with the words "Limited Liab	ility Company, "L.L.C.," or "LLC.		
		• •	.")	計
Pt				ALCON MANAGEMENT AND THE PROPERTY OF THE PROPE
ne mailing address and street	t address of the principal office	of the Limited Liability Company i	is:	# <u></u> 9
<u>Princ</u>	Principal Office Address:		Address:	E SE
12615 N. 56th St. Tampa FL 33617		12615 N. 56th St. Tampa FL 33617		gri
The Limited Liability Compa nother business entity with a	Agent, Registered Office, & Reginy cannot serve as its own Regin active Florida registration.) The address of the registered agent	stered Agent. You must designate a	an individual o	r
The Limited Liability Compa nother business entity with a	any cannot serve as its own Region active Florida registration.) The tet address of the registered agents Jia Wen Guan	stered Agent. You must designate a	an individual o	r
The Limited Liability Compa nother business entity with a	any cannot serve as its own Region active Florida registration.) The et address of the registered agent of the Guan Nar	stered Agent. You must designate a	an individual o	r
The Limited Liability Compa nother business entity with a	any cannot serve as its own Region active Florida registration.) The address of the registered agents Jia Wen Guan Nar 12615 N. 56th St.	stered Agent. You must designate a	an individual o	r
The Limited Liability Compa mother business entity with a	any cannot serve as its own Region active Florida registration.) The et address of the registered agent of the Guan Nar	stered Agent. You must designate a	an individual o	r

(CONTINUED)

Registered Agent's Signature (REQUIRED)

Page 1 of 2

TIG MAR 25 AM IO: 1'0

Title:	Name and Address:
"AMBR" = Authorized Mem "MGR" = Manager	r
MGR	Jia Wen Guan
	12615 N. 56th St. Tampa FL 33617
(11	
(Use attachment if necessary)	
	the date of filing: April 1st 2016 (OPTIONAL)
LE V: Effective date, if other th	ust be specific and cannot be more than five business days prior to or 90 days a
ffective date is listed, the date	
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ffective date is listed, the date of filing.) If the date inserted in this block ument's effective date on the D LE VI: Other provisions, if any	loes not meet the applicable statutory filing requirements, this date will not be listed partment of State's records.

Signature of a member or an authorized representative of a member.

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.

Jia Wen Guan

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

ARTICLE JV-

\$ 5.00 Certificate of Status (Optional)

TAMASSEE STORIDE

