

L16000102249

(Requestor's Name)

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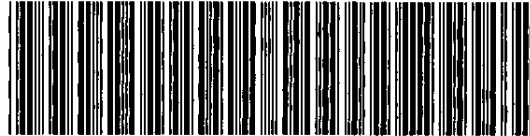
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DIVISION OF CORPORATIONS
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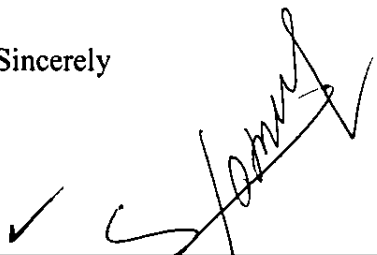
Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Ref: Company : YAMY INVESTMENTS LLC
Document # : L13000174221

I, Yoel A hernandez, President of Yamy Investments LLC, Inc., Florida State Document # L13000174221, With the present I certified my no intention of revoking the Articles of Dissolution on August 20, 2015, therefore, releasing the name for use to another entity.

If you have any question about this letter, please do not hesitate to contact me .

Sincerely



Yoel A Hernandez Rodriguez
Yamy Investments LLC
11303 Temple Street
Cooper City, FL 33330

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: YAMY INVESTMENTS LLC

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:

YOEL A HERNANDEZ RODRIGUEZ

Name of Person

YAMY INVESTMENTS LLC

Firm/Company

11303 TEMPLE STREET

Address

COOPER CITY FL 33330

City/State and Zip Code

FPYSERVICES@COMCAST.NET

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

PEDRO PAREDES

954

392-8669

at (_____) _____

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☐

\$125.00 Filing Fee

☒

\$130.00 Filing Fee &
Certificate of Status

☐

\$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐

\$160.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

Mailing Address

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

Street Address

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

YAMY INVESTMENTS 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:

11303 TEMPLE STREET
COOPER CITY FL 33330

SAME

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:

YOEL A HERNANDEZ RODRIGUEZ

Name

11303 TEMPLE STREET

Florida street address (P.O. Box **NOT** acceptable)

<u>COOPER CITY</u>	<u>FLORIDA</u>	<u>33330</u>
City	State	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..



Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

AMBR

Name and Address:

YOEL A HERNANDEZ RODRIGUEZ

11303 TEMPLE STREET

COOPER CITY FL 33330

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (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.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any.

NONE

REQUIRED SIGNATURE:


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.

YOEL A HERNANDEZ RODRIGUEZ

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)

\$ 5.00 Certificate of Status (Optional)