

L16000125979

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

MAIL

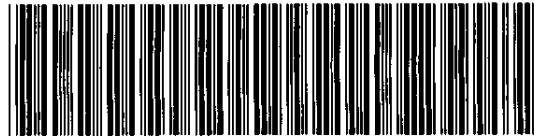
(Business Entity Name)

(Document Number)

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SUNSHINE CORPORATE FILING OF FLORIDA INC.

3458 Lakeshore Drive
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(850) 656-4724

SUNSHINECORPORATE2014@GMAIL.COM

Date: 7-8-16

ENTITY NAME:

YAHKESS, LLC

****PLEASE FILE THE ATTACHED AND RETURN:****

XX Plain Copy
_____ Certified Copy

****PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY:****

Document Number: _____

_____ Certified Copy of Arts & Amendments
_____ Certificate of Good Standing

****APOSTILLE/NOTARIAL CERTIFICATION:****

COUNTRY OF DESTINATION _____

NUMBER OF CERTIFICATES REQUESTED _____

TOTAL AMOUNT OWED: 125

CHECK NUMBER: 2658

PLEASE CONTACT TINA AT 850-508-1891 FOR ANY PROBLEMS OR INFORMATION ON THIS MATTER.

Thank you!

Tina Goff, President

ARTICLES OF ORGANIZATION FOR A FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I NAME

The name of the Limited Liability Company is:

YAHKESS LLC

ARTICLE II ADDRESS

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

10256 NW 33RD STREET

CORAL SPRINGS, FLORIDA 33065

ARTICLE III REGISTERED AGENT

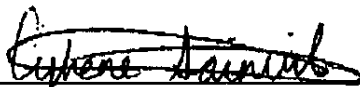
The name and the Florida street address of the registered agent are:

CYBENE SAINVIL

10256 NW 33RD STREET

CORAL SPRINGS, FLORIDA 33065

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.

x 

CYBENE SAINVIL / Registered Agent's signature

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TALLAHASSEE, FLORIDA

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ARTICLE IV

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

AUTHORIZED MEMBER

CYBENE SAINVIL

10256 NW 33RD STREET

CORAL SPRINGS, FLORIDA 33065

X  _____
CYBENE SAINVIL / Authorized Representative's signature

(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.)

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