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COVER LETTER

	Registration Section Division of Corporations		
SUBJECT	Y ALONSO ASSOCIATES, LLC.		
SUBJECT		nited Liability Company	
The enclos	sed Articles of Organization and fee(s) are	submitted for filing.	
Please retu	urn all correspondence concerning this mat	tter to the following:	
	Y	YOHAMS ALONSO	
		Name of Person	_
	Y ALONSO ASSOCIATES, LLC.		
		Firm/Company	_
	11495 W FLAGLER STREET APT #30	01	
		Address	_
	MIAMI, FL 33174		
	Cit yoyoalonso@yahoo.com	ity/State and Zip Code	
	E-mail address: (to be used f	for future annual report notification)	_
For further i	information concerning this matter, please	call:	
	YOHAMS ALONSO at (305 244-6053	
		rea Code Daytime Telephone Number	
Enclosed i	is a check for the following amount:		
\$125.00 F	· • • • • • • • • • • • • • • • • • • •	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed) \$160.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed)	s &
	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

4 23 1

ARTICLE I -, Name: The name of the Limited Liabilit					FILED			
	y company 101			17	IAM O	Ðн г	. 00	
Y ALONSO ASSOC	IATES, LLC.			17	JAN -3	Fil 5	: 03	
	with the words "Limited	Liability Company, "I	L.C.," or "LLC.")		Mr. I 487 (
ARTICLE II - Address: The mailing address and street ad	ddress of the principal of	fice of the Limited Lia	ability Company is:	} #i.	LAHAGSEE	, řLJ¶!	注 及	
<u>Principa</u>	al Office Address:		Mailing Ad	<u>dress</u> :				
11495 W FLAGLER MIAMI,FL 33174	STREET APT# 301		V FLAGLER STRE ,FL 33174	ET AI	PT# 301			
ARTICLE III - Registered Age (The Limited Liability Company another business entity with an a	cannot serve as its own l ctive Florida registration	Registered Agent. You n.)		individ	lual or			
	YOHAMS ALONSO							
		Name	_					
	11495 W FLAGLER S	STREET APT # 301						
	Florida street address	(P.O. Box NOT acce	ptable)					
	MIAMI	FLORIDA	33174					
	City	State	Zip					
Having been named as registered of place designated in this certificate, further agree to comply with the pram familiar with and accept the ob	I hereby accept the appo ovisions of all statutes rel ligations of my position a	intment as registered a lating to the proper an	igent and agree to ac d complete performa rovided for in Chapi	ct in thi ince of	is capacity. I my duties, ar	•		
		(CONTINUED)						
		Page 1 of 2						

Name and Address:
VOLLANG AV ONGO
YOHAMS ALONSO
11495 W FLAGLER STREET APT# 301
MIAMI, FL 33174
YOHAMS ALONSO
11495 W FLAGLER STREET APT# 301
MIAMI, FL 33174

ARTICLE V: Effective date, if other than the date of filing: __01-01-2017 ______. (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.)

<u>Note:</u> 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.

REOUIRED 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.

YOHAMS ALONSO

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)