

Division of Corporations

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**L19000116800**

Florida Department of State  
Division of Corporations  
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To:

Division of Corporations  
Fax Number : (850) 617-6381

From:

Account Name : BUSINESS ACCOUNTING PROFESSIONALS CORP  
Account Number : I20190000020  
Phone : (786) 953-7449  
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**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

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**FLORIDA LIMITED LIABILITY CO.  
YMCLUSIVE LLC**

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MAY 08 2019

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**Articles of Organization  
For  
Florida Limited Liability Company**

SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
19 MAY -7 AM 8:13

The undersigned company, for the purpose of forming a Florida limited liability company, hereby adopts the following Article of Organization:

**Article I**

The name of the limited liability company is:  
YMCLUSIVE LLC

**Article II**

The street address of the principal office of the Limited Liability Company is:  
5841 NW 194<sup>TH</sup> TERRACE  
HIALEAH, FL. 33015

The mailing address of the Limited Liability Company is:  
5841 NW 194<sup>TH</sup> TERRACE  
HIALEAH, FL. 33015

**Article III**

Other provisions, if any:  
ANY AND ALL LAWFUL BUSINESS.

**Article IV**

The name and Florida street address of the registered agent is:  
YENILEN A. MOLA  
5841 NW 194<sup>TH</sup> TERRACE  
HIALEAH, FL. 33015

Having been named as a registered agent and to accept service of process of 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.

Registered Agent Signature: \_\_\_\_\_



### Article V

The name and address of person(s) authorized to manage the LLC:

Title: MGRM  
YENILEN A. MOLA  
5841 NW 194<sup>TH</sup> TERRACE  
HIALEAH, FL. 33015

Title: MGRM  
YOSHVANI MEDINA  
5841 NW 194<sup>TH</sup> TERRACE  
HIALEAH, FL. 33015

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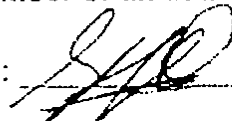
### Article VI

The effective date of this Limited Liability Company Shall be:

05/06/2019

Signature of member or an authorized representative:

Signature: \_\_\_\_\_



I am a member or authorized representative submitting these Articles of organization and affirm that the facts state herein are true. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provide for in S.817.155, F.S. I understand the requirement to file an annual report between January 1<sup>st</sup> and May 1<sup>st</sup> in the calendar year following the formation of the LLC and every year thereafter to maintain "active" status.