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From: Yanet Avila

Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:	Division of Corporations	١١ ونو	29
	Fax Number : (359)617-6381	65 T.	_
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From:	Annual Manager CONSCIONT FILTHE CERUTEE THE		ಧ
	Account Name : EXPRESS CORPORATE FILING SERVICE INC. Account Number : 120000000146	<u>ڪ ج</u>	က္
	Phone : (365)444-4994	121	σ
	Fax Number : (305)444-4977		
	the email address for this business entity to be used for fut	ure	
	the email address for this business entity to be used for fut wal report mailings. Enter only one email address please.**	ture	

## FLORIDA LIMITED LIABILITY CO. Y & Y GROUP USA, LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

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Corporate Filing Menu

Help

ARTICLES OF	ORGANIZATION FOR FLO	RIDA LIMITED LL	ABILITY COMPANY
ARTICLE I - Name: The name of the Limited Liability	Company is:		
	Y & Y GROUP US	A, LLC	
(Must end w	ith the words "Limited Lin	bility Company, "	L.L.C.," or "ELC.")
ARTICLE II - Address: The mailing address and street ad-	dress of the principal office	of the Limited Li	ability Company is:
<u>Principa</u>	l Office Address:		Mailing Address:
26450 SW 146TH C	T APT 308	26450	SW 146TH CT APT 308
HOMESTEAD, FL 3	3032	HOME	STEAD, FL 33032
ARTICLE III - Registered-Agei (The Limited Liability Company of another business entity with an ac The name and the Florida street ac	cannot serve as its own Reg etive Florida registration.)	istered Agent. Yo	s Signature: u must designate an individual or
	YURISBEL G	AINZA HERNAI	NDEZ
	Na	ime	
	26450 SW	46TH CT APT 3	808
	Florida street address (P.	O. Box <u>NOT</u> acce	eptable)
	HOMESTEAD	FL	33032

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. Thereby 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 603, F.S.,

City

State

Registered Agent's Signature (REQUIRED)

Zip

(CONTINUED)

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From: Yanet Avila

PANED 1 4 MARIN		Name and Address:
	ized Member	
"MGK" Manager MGR		YURISBEL GAINZA HERNANDEZ
		26450 SW 146TH CT APT 308
		HOMESTEAD FL 33032
MGR		YAIMA BERNAL
	<del></del>	26450 SW 1467H CT APT 308
		HOMESTEAD FL 33032
	<del></del>	
(Use anachment if	DOCESTALA:	
CTICLE V: Effective date	e if other than the date of filing	(OPTIONAL)
an effective date is listed	, the date must be specific an	d cannot be more than five business days prior to or 90 days af
date of filing.)	•	
		applicable statutory filing requirements, this date will not be liste
e document's effective da	te on the Department of Siste'	s.records.
	and if any	
CTICLE VI: Other provisi	ors, d'aby. Purpose THIS LIMITED LIAB	BLITY COMPANY IS , ANY AND ALL LAWFUL BUSINESS
CTICLE VI: Other provisi	ors, if any PURPOSE THIS LIMITED LIAB	ILITY COMPANY IS , ANY AND ALL LAWFUL BUSINESS
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2021-03-29 13:24:24 GMT

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YURISBEL GAINZA HERNANDEZ Experior printed name of signice

constitutes a third degree felony as provided for in s.817.155, F.S.