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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : EXPRESS CORPORATE FILING SERVICE INC.

Account Number : I20000000145 Phone : (305)444-4994 Fax Number : (305)444-4977

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:

## FLORIDA LIMITED LIABILITY CO. YUCESOY LLC

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

Electronic Filing Menu

Corporate Filing Menu

Help



distance signature somheated in a limit to be 1981-1991

ARTICLES OF ORGANIZATION FOR FLORID	ALIMITED LIABILITY COMPANY
ARTICLE 1 - Name: The name of the Limited Liability Company is:	
YUCESOY LLC	
(Must contain the words "Limited Liability	Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal office of	
Principal Office Address:	Mailing Address:
520 BRICKELL KEY DR	
#A1619	SAME
MIAMI, FL 33131	
ARTICLE III - Registered Agent, Registered Office, & Registered Limited Liability Company cannot serve as its own Register another business entity with an active Florida registration.)	istered Agent's Signature: cred Agent. You must designate an individual or
The name and the Florida street address of the registered agent of	ere:
YUSUF YUCESOY	
Name	
520 BRICKELL KEY DR #	A1619

| State | Stat

Having been named as registered agent and to accept service of process for the above stated limited flability 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 daties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S..

Gusuf Gucesoy Signature (REQUIRED)

(CONTINUED)

SECRETARY OF STATE

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Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
AMBR	YUSUF YUCESOY 520 BRICKELL KEY DR #A1619
	MIAMI, FL 33131
MGR	GULCIN MORELLO
	520 BRICKELL KEY DR #A1619 MIAMI, FL 33131
	1744, 1774
(Use attachment if necessary)	
•	ate of fitting (OPTIONAL)
1 V.V. Effective date if other than the d	ate of fifing: (OPTIONAL) specific and cannot be more than five business days prior to or 90 d
LE V: Effective date, if other than the diffective date is listed, the date must be	specific and cannot be more than five business days prior to or 90 d
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Filing Fee:

Typed or printed name of signee

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

5 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

SECRETARY OF STATE