1210032119

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



700371339917

08/13/21--01019--006 **125.00

SECRETARY OF STATE
TALL ASSASSES STATE

February 23, 2021

Department of State
New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Re: YHG PRODUCTIONS LLC

To whom it may concern:

By means of this letter I am advising that I have no intentions of re-instating the above mentioned dissolved corporation.

Should you have any questions or concerns please do not hesitate to contact me.

Sincerely,

YOAN HERNANDEZ-

CARLOS RUIZ

Notary Public-State of Florida

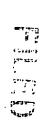
Commission # HH 74168

My Commission Expires

December 21, 2024

Col

2021 JUL 13 AM 7: 20 SECRETARY OF STATE TALL AHASSES TATE



COVER LETTER

TO: N	New Filing Section Division of Corporations		
	YHG PRODUCTIONS LLC		
SUBJEC	T: Name	of Limited Liability Company	
The enclo	sed Articles of Organization and fed	e(s) are submitted for filing.	
	urn all correspondence concerning t		
	MARIA E RUIZ		
		Name of Person	
	L & M ACCOUNTING SERVICE	CES INC	
		Firm/Company	
	7750 SW 117TH AVE SUITE 2	03	
		Address	
	MIAMI FLORIDA 33183		
		City/State and Zip Code	
	MARIAQUIROS9@HOTMAIL.	COM	-
	E-mail address: (to t	be used for future annual report notification)	
For further	r information concerning this matter	r, please call:	2021
	MARIA RUIZ	305 595-2407 EE	¥
	Name of Person	Area Code Daytime Telephone Number	$\overline{\omega}$
Enclosed	d is a check for the following amour	mti (Free	*
	Filing Fee S130.00 Filing F Certificate of St	ce & S155.00 Filing Fee & S160.00 Filing Fee.	
	Mailing Address New Filing Section	Street Address New Filing Section Division of Corporations	

New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassec, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

YHG PRODUCTION	S LLC		0.0 011000	
(Must conta	ain the words "Limited Lia	ibility Company, "L.I	L.C.," or "LLC.")	
TCLE II - Address: mailing address and street ac	Idress of the principal offic	ce of the Limited Lia	bility Company is:	
<u>Princip</u>	al Office Address:		Mailing Address:	
5005 OW 117TH AV	17	7750 SV	V 117TH AVE SUITE 203	
	295 SW 117TH AVE		MIAMI FLORIDA 33183	
MIAMI FLORIDA 3 TCLE III - Registered Age Limited Liability Company	ent, Registered Office, & cannot serve as its own Re	Registered Agent's egistered Agent. You	Signature:	
MIAMI FLORIDA 3	ent. Registered Office. & cannot serve as its own Reactive Florida registration.)	Registered Agent's egistered Agent, You)	Signature:	
MIAMI FLORIDA 3 FICLE III - Registered Ago Limited Liability Company her business entity with an a	ent, Registered Office, & cannot serve as its own Reactive Florida registration.) address of the registered at YOAN HERNANDEZ	Registered Agent's egistered Agent. You) gent are:	Signature:	
MIAMI FLORIDA 3 FICLE III - Registered Ago Limited Liability Company her business entity with an a	ent, Registered Office, & cannot serve as its own Reactive Florida registration.) address of the registered at YOAN HERNANDEZ	Registered Agent's egistered Agent. You) gent are:	Signature:	
MIAMI FLORIDA 3 FICLE III - Registered Ago Limited Liability Company her business entity with an a	ent, Registered Office, & cannot serve as its own Reactive Florida registration.) address of the registered at YOAN HERNANDEZ	Registered Agent's egistered Agent. You) gent are: Name	Signature: nust designate an individu	
MIAMI FLORIDA 3 FICLE III - Registered Ago Limited Liability Company her business entity with an a	ent, Registered Office, & cannot serve as its own Reactive Florida registration.) address of the registered at YOAN HERNANDEZ	Registered Agent's egistered Agent. You) gent are: Name	Signature: i must designate an individu	
MIAMI FLORIDA 3 FICLE III - Registered Ago Limited Liability Company her business entity with an a	ent, Registered Office, & cannot serve as its own Reactive Florida registration.) address of the registered at YOAN HERNANDEZ	Registered Agent's egistered Agent. You) gent are: Name	Signature: i must designate an individu	

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..

(CONTINUED)

Registered Agent's Signature (REQUIRED)

2021 JUL 13 AM 7: 20 SECRETARY LESSEN

The name and address of each person authorized to manage and control the Limited Liability Company: ARTICLE IV-Name and Address: Title: "AMBR" = Authorized Member "MGR" = Manager YOAN HERNANDEZ MGR5295 SW 117TH AVE MIAMI FLORIDA 33183 (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: (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 Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the date of filing.) the document's effective date on the Department of State's records. ARTICLE VI: Other provisions, if any. REQUIRED 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. YOAN HERNANDEZ 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)