

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

**L22000181681**

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((H22000160440 3)))



H220001604403ABCT

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

From:  
Account Name : MARIA XIMENA MARTINEZ  
Account Number : I20220000054  
Phone : (786)571-4129  
Fax Number : (786)590-1744

**\*\*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.  
YSMR INVESTMENTS GROUP LLC**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$125.00

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2022 MAY -3 PM 4:55  
DIVISION OF CORPORATIONS  
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2021 MAY -3 AM 7:50  
DIVISION OF CORPORATIONS  
ALLAHSEE, FLORIDA

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COVER LETTER

TO: New Filing Section  
Division of Corporations

SUBJECT: YSMR INVESTMENTS GROUP LLC  
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

YVONNE SANTANA CRUZ

Name of Person

YSMR INVESTMENTS GROUP LLC

Firm/Company

3444 BELLERICAY LN

Address

LAND O LAKES, FL 34638

City/State and Zip Code

INFO@MODERNSOLUTIONSGROUP.NET

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

YVONNE SANTANA CRUZ 787 309-2316  
Name of Person at Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$125.00 Filing Fee  
☐ \$130.00 Filing Fee & Certificate of Status  
☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)  
☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

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

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

YSMR INVESTMENTS GROUP 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 the Limited Liability Company is:

Principal Office Address:

Mailing Address:

3444 BELLERICAY LN  
LAND O LAKES, FL 34638

3444 BELLERICAY LN  
LAND O LAKES, FL 34638

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

MARIA XIMENA MARTINEZ

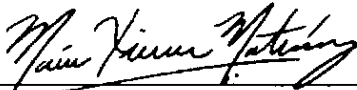
Name

2424 W. BRANDON BLVD. #1282

Florida street address (P.O. Box **NOT** acceptable)

<u>BRANDON</u>	<u>FL</u>	<u>33511</u>
City	State	Zip

*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..*



Registered Agent's Signature (REQUIRED)

(CONTINUED)

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CLERK OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE IV-**

The name and address of each person authorized to manage and control the Limited Liability Company:

**Title:**

"AMBR" = Authorized Member

"MGR" = Manager

MGR

**Name and Address:**

YVONNE SANTANA CRUZ

3444 BELLERICAY LN

LAND O LAKES FL 34638

MGR

MICHELLE RAMOS SANTIAGO

3444 BELLERICAY LN

LAND O LAKES FL 34638

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: \_\_\_\_\_ (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.)

**Note:** 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.

The purpose of the Limited Liability Company is to engage in any lawful activity for which a Limited Liability

Company may be organized in the state of Florida

**REQUIRED SIGNATURE:**

YVONNE SANTANA CRUZ

**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.

YVONNE SANTANA CRUZ

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)

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DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA