

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

(((H22000162486 3)))



H220001624863ABC+

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

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. YAHK BROS INVESTMENTS LLC

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

Electronic Filing Menu

Corporate Filing Menu

Help



## COVER LETTER

	w Filing Section vision of Corporations	
SUBJECT:	YAHK BROS INVESTMENTS LLC	
SUBJECT:	Name of Limited Liability Company	
The enclosed	d Articles of Organization and fee(s) are submitted for filing.	
Please return	n all correspondence concerning this matter to the following:	
	KAYRA L DELGADO BAERGA	
-	Name of Person	
	YAHK BROS INVESTMENTS LLC	
•	Firm/Company	
	URB CASTELLANA GDN B6 CALLE #1	
•	Address	
	CAROLINA, PR 00983	
	City/State and Zip Code	
_	E-mail address: (to be used for future annual report notification)	
For further in	formation concerning this matter, please call:	?
	formation concerning this matter, please call:  KAYRA L DELGADO 939 940-5181	
~	Name of Person Area Code Daytime Telephone Number	
Enclosed is	a check for the following amount:	
\$125.00 Fil	ing Fee \$\ \text{S130.00 Filing Fee & Certificate of Status} \text{S155.00 Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed)} \text{S160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)}	
	Mailing AddressStreet AddressNew Filing SectionNew Filing SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301	

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	ҮАНК В	ROS INVESTMEN	ITS LLC	
(Must conta	in the words "Limited I	Liability Company,	"L.L.C.," or "LLC.")	
ARTICLE II - Address:				
The mailing address and street ad	ldress of the principal of	ffice of the Limited	Liability Company is:	
<u>Principa</u>	al Office Address:		Mailing Address:	
5401 PINETRAIL WAY		URI	B CASTELLANA GDN B6 CALLE #1	
ORLANDO FL 3282	2	CAI	ROLINA, PR 00983	
(The Limited Liability Company	cannot serve as its own	Registered Agent.	nt's Signature: You must designate an individual or	992
(The Limited Liability Company another business entity with an a	cannot serve as its own ctive Florida registratio	Registered Agent. n.)		2621 114
The Limited Liability Company another business entity with an a	cannot serve as its own ctive Florida registratio	Registered Agent. n.) agent are:	You must designate an individual or	2521 1134 -
(The Limited Liability Company another business entity with an a	cannot serve as its own ctive Florida registratio address of the registered	Registered Agent. n.) agent are:	You must designate an individual or	5521 1134 -5
(The Limited Liability Company another business entity with an a	cannot serve as its own ctive Florida registratio address of the registered	Registered Agent. n.) agent are: MARTINEZ Name	You must designate an individual or	70.
(The Limited Liability Company another business entity with an a	cannot serve as its own ctive Florida registration address of the registered MARIA XIMENA M	Registered Agent. n.) agent are: MARTINEZ Name I BLVD, #1282	You must designate an individual or	70.
ARTICLE III - Registered Age (The Limited Liability Company another business entity with an a	cannot serve as its own ctive Florida registration address of the registered MARIA XIMENA M	Registered Agent. n.) agent are: MARTINEZ Name I BLVD, #1282	You must designate an individual or	_

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)

ARTICLEIV	٠.
The name and	

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

	Title: "AMBR" = Authorized Member	Name and Address:				
	"MGR" = Manager					
	MGR = Manager	KAYRA L DELGADO BAERGA				
		5401 PINETRAIL WAY				
		ORLANDO FL 32822				
	MCB	LICCTOR OMAR ROMANO ROPLES				
	MGR	HECTOR OMAR BONANO ROBLES				
		5401 PINETRAIL WAY ORLANDO FL 32822				
		ORLANDO FL 32822				
	(Use attachment if necessary)					
RTIC	CLEV: Effective date, if other than the date	of filing: (OPTIONAL)				
	•	ecific and cannot be more than five business days prior to or 90 days after				
	e of filing.)					
	If the date inserted in this block does not recument's effective date on the Department	neet the applicable statutory filing requirements, this date will not be listed a of State's records.				
DOTE	TO THE CO.					
	CLE VI: Other provisions, if any.	to engage in any lawful activity for which a Limited Liability				
	any may be organized in the state of Florid					
<u> </u>	my may be organized in the male of this to					
	REQUIRED SIGNATURE:	n				
	KAY	RA L DELGADO BAERGA				
	· ·	ember or an authorized representative of a member.				
		ted in accordance with section 605.0203 (1) (b), Florida Statutes.				
	I am aware that any false	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.				
	Į.					
		KAYRA L DELGADO BAERGA Typed or printed name of signee				
		r prod or princed name or digited				

## 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)



as