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CORPORATE ACCESS, ____

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INC.

236 East 6th Avenue. Tallahassee, Florida 32303 P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

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1.	YENNEPHER MOBLE (CORPORATE NAME AND DOC	NOTARY UMENT#)	SERVICES, LLC	
2.	(CORPORATE NAME AND DOC	UMENT #)		
3.	(CORPORATE NAME AND DOCU	UMENT #)		
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6.	(CORPORATE NAME AND DOCU	UMENT #)		22
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:

The name of the Limited Liability Company is:

YENNEPHER MOBILE NOTARY SERVICES, 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:

915 NW 1ST AVE #H3011

PO BOX 351634

MIAMI, FL 33136

MIAMI, FL 33135

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

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

JENNIFER MOLINA AGOSTINI 915 NW 1ST AVE #H3011 MIAMI, FL 33136

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.

/S/ JENNIFER MOLINA AGOSTINI
Registered Agent's Signature

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(CONTINUED)

ARTICLE IV- Members/Managers

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

Title:

Name and Address:

"AMBR" = Authorized Member

"MGR" = Manager

AMBR

JENNIFER MOLINA AGOSTINI 915 NW 1ST AVE #H3011 MIAMI, FL 33136

ARTICLE V: EFFECTIVE DATE

The effective date of this filing is July 18, 2022.

REQUIRED SIGNATURE:

/S/JENNIFER MOLINA AGOSTINI

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.

JENNIFER MOLINA AGOSTINI

Typed or printed name of signee