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Division of Corporations

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

From: Account Name : EDDIE FERNANDEZ, PA  
Account Number : J20190000058  
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\*\*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.  
JOHN YOUNG CAPITAL HOLDING, LLC

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

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**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name**

The name of the Limited Liability Company is:

**JOHN YOUNG CAPITAL HOLDING, LLC**

**ARTICLE II - Address**

The street address of the principal office of the Limited Liability Company is:

1115 N John Young Parkway  
Kissimmee, FL 34741

The mailing address of the Limited Liability Company is:

931 W Oak Street  
Suite 103  
Kissimmee, FL 34741

**ARTICLE III - Registered Agent and Office and Registered Agent's Signature**

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

Delaray Garcia  
10600 Lago Bella Dr.  
Orlando, FL 32832

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, Florida Statutes.

Registered Charge

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FLORIDA SECRETARY OF STATE

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*Delaray Garcia*

By: \_\_\_\_\_  
(Registered Agent's Signature)  
Delaray Garcia

**ARTICLE IV – Authorized Person(s)**

The name and address of the person authorized to manage this Limited Liability Company is:

Title: AR  
Delaray Garcia  
10600 Lago Bella Dr.  
Orlando, FL 32832

**ARTICLE V – Effective Date**

The effective date for this Limited Liability Company shall be:

September 15, 2022.

*Delaray Garcia*

\_\_\_\_\_  
**Delaray Garcia**  
(Signature of a member or an authorized representative of a member)

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that 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. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that 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. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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