Division of Corporations **Electronic Filing Cover Sheet**

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : FANDUL ENTERPRISES LLC

Account Number : I20190000080 Phone : (305)603-8791

Fax Number : (877)503-6086

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:_

<u>J/H</u> 10/20/23

FLORIDA LIMITED LIABILITY CO. YAHWEHIN CONSTRUCTIONS LLC

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

Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE	I - Name:
The name of	f the Limite

d Liability Company is:

YAHWEHIN CONSTRUCTIONS 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:
1740 FUNSTON ST APT I	1740 FUNSTON ST APT 1
HOLLYWOOD, FL 33020	HOLLYWOOD, FL 33020

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:

JORGE KASSABGI	AKURAS	
	Name	
1740 FUNSTON ST	APT 1	
Florida street address	(P.O. Box <u>NOT</u> ac	cceptable)
HOLLYWOOD	FL	33020
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)



ARTICLE IV-

Fax: 18775036086

To:

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

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
MGR	JORGE KASSABGI AKURAS
	1740 FUNSTON ST APT 1
	HOLLYWOOD, FL 33020

(Use attachment if necessary)	
ARTICLE V: Effective date, if other than the da	te of filing:
(If an effective date is listed, the date must be s	pecific and cannot be more than five business days prior to or 90 days af
the date of filing.)	
	meet the applicable statutory filing requirements, this date will not be liste
the document's effective date on the Departmen	it of State's records.
ARTICLE VI: Other provisions, if any.	NE THE CONTAINS
	DF THE COMANY
MEANITHEN CICK ATTOE.	
REQUIRED SIGNATURE:	
Jan Mary Mary Mary Mary Mary Mary Mary Mary	.
Signature of a r	nember or an authorized representative of a member.
	cuted 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.

JORGE KASSABGI AKURAS

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)



as