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Certified Copies	Certificates of St	tatus
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## COVER LETTER

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SUBJECT	YZER NEX	T LLC			
30031.0.1		Name	of Limited Lia	bility Company	
The enclose	ed Articles of	Organization and fe	r(s) are submitt	ted for filing.	
Please retur	n all correspo	ndence concerning t	his matter to th	e following:	
	Andrew Hoel	k, Esq.			
			Name	of Person	
	DeWitt Law	Firm, P.A.			
			Firm/	Company	
	1560 W. Cle	veland Street			
			Ac	ldress	
	Tampa, Flori	da 33606			
,	andrewhoek@	dewittlaw.com	City/State	and Zip Code	
<del>-</del>	• • • • • • • • • • • • • • • • • • • •	·	e used for futur	e annual report notificati	ion)
For further in	nformation con	neerning this matter,	please call:		
	Andrew Hock	į.	813 _at (	251-2701 )	
	Nam	e of Person	Area Code		
Enclosed is	a check for th	ne following amount	<u>:</u>		
■\$125.00	Filing Fee	□S130.00 Filing Certificate of Stat	tus Cer	1155.00 Filing Fee & tified Copy is enclosed)	☐\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	New F Divisio P.O. B	g Address iling Section on of Corporations ox 6327 assee, FL 32314		Street Address New Filing Section Di The Centre of Tallaha 2415 N. Monroe Stre Tallahassee, FL 3230	assee et, Suite 810

ARTICL	ES OF ORGANIZATION FO	RFLORIDALIMETE	DIJABILITY COMPANY
ARTICLE I - Name: The name of the Limited Li	ability Company is:		
YZER NEXT L	LC		
(Must	contain the words "Limite	d Liability Company	(, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and str	cet address of the principal	office of the Limite	d Liability Company is:
<u>Pri</u>	incipal Office Address:		Mailing Address:
410 Ware Blvd	Suite 910	410	) Ware Blvd Suite 910
Tampa, Florida	33619	Tai	npa, Florida 33619
ARTICLE III - Registered (The Limited Liability Comanother business entity with	ipany cannot serve as its ov	vn Registered Agent	You must designate an individual or
The name and the Florida s	treet address of the register	ed agent are:	
	DeWitt Law Firm,	P.A.	
		Name	
	1560 W. Cleveland	Street	
	Florida street addr	ess (P.O. Box <u>NOT</u>	acceptable)
	Tampa	FL	33606
	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. 1 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.,

-DocuSigned by: andrew Hock Registered Agent's Signature (REQUIRED)

(CONTINUED)

\$ 5.00 Certificate of Status (Optional)

Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:
MGR	IBV HOLDINGS LLC 410 Ware Blvd. Suite 910 Tampa, Florida 33619
<del></del>	
(Use attachment if necessary)  CLE V: Effective date, if other than the da	te of filing: 01/03/2024 (OPTIONAL)
CLE V: Effective date, if other than the dateffective date is listed, the date must be set of filing.)  If the date inserted in this block does not	te of filing: 01/03/2024 (OPTIONAL)  pecific and cannot be more than five business days prior to or 90 da  meet the applicable statutory filing requirements, this date will not be  nt of State's records.
CLE V: Effective date, if other than the date effective date is listed, the date must be steen of filing.)  If the date inserted in this block does not occument's effective date on the Department of the Departm	pecific and cannot be more than five business days prior to or 90 da meet the applicable statutory filing requirements, this date will not be at of State's records.
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CLE V: Effective date, if other than the date effective date is listed, the date must be steen of filing.)  If the date inserted in this block does not be determined by the date on the Department of the CLE VI: Other provisions, if any.  REQUIRED SIGNATURE:	meet the applicable statutory filing requirements, this date will not be not of State's records.
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CLE V: Effective date, if other than the date effective date is listed, the date must be stee of filing.)  If the date inserted in this block does not be determined by the date on the Department of the Departme	meet the applicable statutory filing requirements, this date will not be not State's records.  Scusigned by:  Copy  3732552222000  nember or an authorized representative of a member.  uted in accordance with section 605.0203 (1) (b). Florida Statutes, se information submitted in a document to the Department of State rece felony as provided for in s.817.155, F.S.