Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : 120000000019 Phone : (305)552-5973 Fax Number : (305)675-5944

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## FLORIDA LIMITED LIABILITY CO. YA GENERAL SERVICES LLC

Certificate of Status	1
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Estimated Charge	\$130.00

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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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ARTICLE I - Name:	
The name of the Limited Liability Company is:	
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YA GENERAL SERVICES LLC	
ARTICLE II - Address:	<del></del>
The mailing address and etc.	
The mailing address and street address of the principal office Company is:	Of the Limite Law
	or the climed . Lability
73345W215T MIAMIFC 33155	
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ARTICLE III - Porton	
ARTICLE III - Registered Agent, Registered Office: The name and the Florida street address of the registered agent Company cannot serve as its own Registered Agent. You must designate on individual or and with an active Florida registration.)	
Company cannot serve as its own Registered address of the registered agent	tare, at
Company cannol serve as its own Registered Agent. You must designate on individual or and with an active Florida registration.)	other business entire
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ARTICLE IV	C -
he name and title of each person authorized to manage and coniability Company: (MGR or AMBR)	
additive Company: (MGR or AMBR)	itrol the Limited
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## Required Signatures:

Signature of a member or an authorized representative of a member.

In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. 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.

YUNIFSKY ALBERTERIS LABRADA
Typed or printed name of signee

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)