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To:

Division of Corporations

Fax Number

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From:

Account Name : EXPRESS CORPORATE FILING SERVICE INC.

Account Number : I20000000146 Phone : (305)444-4994 Fax Number : (305)328-4774

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. Y & Y CONSULTING SERVICES LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:

To: •

The name of the Limited Liability Company is:

Y & Y CONSULTING SERVICES 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:	
4921 SW 146 AVE	4921 SW 146 AVE	
MIAMI, FL 33175	MIAMI, FL 33175	

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:

YENNYS VALDES	GARCES	
-	Name	
4921 SW 146 AVE		
Florida street addres	s (P.O. Box <u>NOT</u> ac	eceptable)
МІАМІ	FL	33175
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..

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Yerreys Valdes (Oct 16, 2024 15:52 EDT)	:
Registered Agent's Sig	nature (REQUIRED)

(CONTINUED)

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ARTICLE IV-	A	R	П	C	LE	. 1	٧-
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The name and address of each person authorized to manage and control the Limited Liability Company:

	litle:	Name and Address:
	AMBR" = Authorized Member	
- 1	MGR" = Manager	•
	AMBR	YENNYS VALDES GARCES
		4921 SW 146 AVE MIAMI. FL 33175
		MIAMILIE JULIA
,	AMBR	VANVIEL LOZANO
1	CVIDK	YANKIEL LOZANO 218 ALMERIA AVE
		CORAL GABLES, FL 33134
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- 1 - 1.		
J)	Use attachment if necessary)	
ARTICLE	V: Effective date, if other than the o	late of filing: (OPTIONAL)
(If an effec	tive date is listed, the date must be	specific and cannot be more than five business days prior to or 90 days after
the date of		
		ot meet the applicable statutory filing requirements, this date will not be listed a
the docum	ent's effective date on the Departm	ent of State's records.
ARTICLE	VI: Other provisions, if any.	
	· · · · · · · · · · · · · · · · · · ·	
		•
B	EQUIRED SIGNATURE:	
		n
	Vonna Voltes (Crast Nova 11 a)	member or an authorized representative of a member.
		ecuted in accordance with section 605.0203 (1) (b), Florida Statutes.
thiChr.	I am aware that any f	also information submitted in a document to the Department of State
` ; _ ti	constitutes a third de	gree felony as provided for in s.817.155, F.S.
	YENNYS VA	LDES GARCES Typed or printed name of signee
		ryped of princed name of signee
		Ciling Face

Filing Fees:
\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificates of Control (Control (Co

\$ 5.00 Certificate of Status (Optional)

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