

	Requestor's Name)	
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(<i>F</i>	Address)	
	Address)	
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(0	City/State/Zip/Phone #)
PICK-UP	☐ WAIT	MAIL
(E	Business Entity Name	•)
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([Ocument Number)	
Certified Copies	Certificates o	of Status
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Special Instructions t	o Filing Officer:	:
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Fast YJC LLC	
Please Debit FCA000000003 For: 125	2024 DEC 2
Thank you Seth Neeley	
Stoff	Art of Inc. File
	Fictitious Name File Trade/Service Mark Merger File
	Art. of Amend. File
	Annual Report / Reinstatement Cert. Copy Photo Copy
	Certificate of Good Standing Certificate of Status
	Certificate of Fictitious Name
	Corp Record Search
11-	Officer Search
	Fictitious Search
Signature	Fictitious Owner Search
	Vehicle Search
	Driving Record
Requested by:	UCC 1 or 3 File
Name Date Time	UCC 11 Search
rume Date fille	UCC 11 Retrieval
Walk-In Will Pick Up	Courier

COVER LETTER

TO:	New Filing Se Division of Co						
SUBJE	Fast YJC 1	LLC					
0000		Name of L	mited Liab	ility Company			
The end	closed Articles of	f Organization and fee(s) a	re submitte	ed for filing.			20
Please 1	return all corresp	ondence concerning this n	natter to the	e following:		:	2024 DEC
	Avi J. Litwi	n, Esq.					
	<u></u>		Name	of Person	·	(_
						⁻า:_	٠.
			Firm/C	Company		 -	_ ~
	4434 Sherid	an Avenue					
			Add	iress			_
	Miami Beac	h, Florida 33140					
			City/State a	ınd Zip Code			_
	anq81md@ya	E-mail address: (to be use	d for future	annual report notificat	ion)		_
or furthe		oncerning this matter, pleas			.00,		
	Avî J. Litwin		86	276-6150			
	Naп		Area Code	Daytime Telephon	e Number		
Englosa	d is a sheet for t	he following amount:					
	.00 Filing Fee	□\$130.00 Filing Fee &		55.00 Filing Fee &	□\$160.00 F		
		Certificate of Status		fied Copy nal copy is enclosed)	Certificate of Certified Co (additional co	ру	
	<u>Mailir</u>	ng Address		Street Address			
		iling Section on of Corporations		New Filing Section Di The Centre of Tallaha	ivision		
	P.O. B	ox 6327 assee, FL 32314		2415 N. Monroe Stre Tallahassec, FL 3230	et, Suite 810		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

TICLE II - Address: e mailing address and str	eet address of the principal o	ffice of the Limite	d Liability Company is:	
<u>Pri</u>	ncipal Office Address:		Mailing Address:	
5401 Collins Av	renue, #139	81	1 Wilson Street	-
Miami Beach, F	lorida 33140	Va	lley Stream, New York 11581	
			······	· -
•	n an active Florida registration and active Florida registered address of the registered Avi J. Litwin, Esq.	·	: :	<u> </u>
	4434 Sheridan Aven	це		
	Florida street addres	s (P.O. Box NOT	acceptable)	
	Miami Beach	FL	33140	
	City	State	Zip	
ina kaon named as usaist		ointment as registe	he above stated limited liability comp ered agent and agree to act in this ca er and complete performance of my c	pacity

ARTICLE IV-

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

'AMBR" = Authorized Member		
'MGR" = Manager		
MGR	Avishai T. Neuman 811 Wilson Street	
	Valley Stream, New York 11581	
AMBR	Shanon Kleinman	
	8 Alice Place	
	Bergenfield, New Jersey 07621	
	•),40.0
	<u></u>	
•		
Use attachment if necessary)	1 - ,	
Use attachment if necessary)	;	:6 HJ
V: Effective date, if other than the ctive date is listed, the date must	ne date of filing: (OPTIONAL) t be specific and cannot be more than five business days prior to	<u></u>
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\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional).
\$ 5.00 Certificate of Status (Optional)