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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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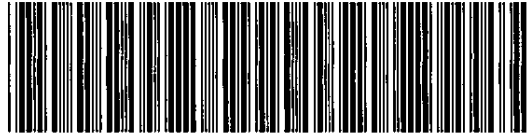
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

JUL 07 2015  
J SHIVERS

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FLORIDA DEPARTMENT OF STATE  
Division of Corporations

May 27, 2015

YASMIN ABREU  
4339 SUSSEX AVE LAKEWORTH  
WEST PALM BEACH, FL 33461

SUBJECT: YARAMON CONSULTING & MANAGEMENT SYSTEMS LLC  
Ref. Number: W15000037250

We have received your document for YARAMON CONSULTING & MANAGEMENT SYSTEMS LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Justin M Shivers  
Regulatory Specialist II  
Registration/Qualification Section

Letter Number: 015A00011073

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Yaramon Consulting & Management Systems LLC.  
Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida..

Please return all correspondence concerning this matter to the following:

Yasmin Abreu  
Name of Person

Yaramon Consulting & Management Systems LLC  
Firm/Company

4339 SUSSEX AVE LAKE WORTH  
Address

West Palm Beach Florida 33461  
City/State and Zip Code

YaramonConsulting1@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Yasmin Abreu at ( 561 - 347 ) 557-1030-OFFICE  
Name of Contact Person Area Code Daytime Telephone Number

**\*MAILING ADDRESS:**

Division of Corporations  
Registration Section  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET ADDRESS:**

Division of Corporations  
Registration Section  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Enclosed is a check for the following amount:

☐ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &  
Certificate of Status

☐ \$155.00 Filing Fee &  
Certified Copy

☒ \$160.00 Filing Fee, Certificate  
of Status & Certified Copy

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS  
IN FLORIDA**

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Yaramon Consulting & Management Systems LLC  
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. Queens NY 11428  
(Jurisdiction under the law of which foreign limited liability company is organized)

3. 47-3206740  
(FEI number, if applicable)

4. \_\_\_\_\_  
(Date first transacted business in Florida, if prior to registration.)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. \_\_\_\_\_  
4339 SUSSEX AVE. Lake Worth  
(Street Address of Principal Office)

6. West Palm Beach 33461  
Same as Above  
(Mailing Address)

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: 4339 SUSSEX AVE / YASMIN ABREU

Office Address: Lake Worth  
West Palm Beach, Florida 33461  
(City) (Zip code)

**Registered agent's acceptance:**

*Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*

[Signature]  
(Registered agent's signature)

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

YASMIN ABREU - Owner - 4339 Lake Worth  
West Palm Beach  
33461

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ALBANY, FLORIDA

9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

[Signature]  
Signature of an authorized person

(In accordance with section 605.0203, F.S., 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.)

YASMIN ABREU  
Typed or printed name of signer

**State of New York**  
**Department of State** } ss:

I hereby certify, that YARAMON CONSULTING & MANAGEMENT SYSTEMS LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 02/23/2015, and that the Limited Liability Company is existing so far as shown by the records of the Department.



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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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*WITNESS my hand and the official seal  
of the Department of State at the City of  
Albany, this 12th day of June two  
thousand and fifteen.*

*Anthony Giardina*

Executive Deputy Secretary of State