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(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only

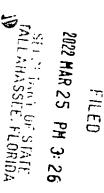


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T. LEMIEUX MAR 28 2022

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## **COVER LETTER**

•	ation Section n of Corporations			
SUBJECT:	YEP LLC	YOU NG	Entrepreneurs y Company	s Platform 1
	pplication by Foreign Limited Liabili neck are submitted to register the abo			
Please return all	correspondence concerning this matte	er to the following:		
		Kera St Name of Person	ephens	
		YEP Firm/Company		
	8341 Sands	point Blv	d B102	
	Tama	rac Floric City/State and Zip Co	da 33321	
-	E-mail address: (10	8 O ama be used for future ann	il-Com ual report notification)	
For further infor	mation concerning this matter, please	call:		
	Kera Stephens	at ( 9 54 Area Co	de Daytime Telephone Nu	158 umber
Registi Divisio P.O. B	Address: ration Section on of Corporations ox 6327 assee, FL 32314	The Centre	Section Corporations of Tallahassee onroe Street, Suite 810	
Please n	d is a check for the following amount nake check payable to: FLORIDA DI .00 Filing Fee 5130.00 Filing Certificat	<b>EPARTMENT OF ST</b> Fee & □ \$155.00	Filing Fee & 🛮 🛮 \$160.00 Fili	ng Fee, Certificate s & Certified Copy



February 17, 2022

KERA STEPHENS 8341 SANDSPOINT BLVD B102 TAMARAC, FL 33321

SUBJECT: YEP LLC

Ref. Number: W22000019791

We have received your document for YEP LLC and your check(s) totaling \$130.00. 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 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.

Letter Number: 522A00003999

Tracy L Lemieux Regulatory Specialist II

www.sunbiz.org

## 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 BUSI	NESS INTHE STATE O	OF FLORIDA:				
, YF.	PLLC					•
(Name of Foreign Li	mited Liability Company:	; must include .	Liability Compa	ally," "L.L.C., or	. ,	
	Sontono	an a C	< 0/c	Haca	-111	,
(It name unavailable enter alternate pen	C1)11C01	CHECK	$\sum_{\alpha} \gamma \alpha / \alpha$		"Limited Liability Co	many ""L L C " or "L L C ")
(It name unavaijable fenter alternate in it	ie adopted for the purpose of	transacting business in Fig				
2 Delaw	are		3 F.11	N. 84	-3779	5514
(Jurisdiction under the law of whice	h foreign limited liability coi	inpany is organized)	J. 4		(FEI number, if appl	icable)
	1 I					
4	22202	.2				
<del></del>	(Date first fransacted busin (See sections 605.0904 &	ness in Florida, if prior to r 605,0905, F.S. to determin	rgistration.) e penalty liability)	)		
82111 C 1	01	1	O	2111		ل در الا
(Street Address of Principal Office)	spoint Bl	VOI	6. <u>D</u>	341 S Mailing Address)	ands po	int Blud
O Lo -	1		,	•	25	<b>92.</b>
B102			•	3102	سم خ	河 芸
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Tamarac	E1 33	321	To	marac	FIZ	257 1
Todittorioce		<del></del>		<i>y</i>		3
7. Name and street address	of Florida registered	agent: (P.O. Rox	NOT accents	able)		3: 21 SIAI FLORI
7. Printe and <u>street abovess</u>	or r roman registered	ugena (1.0. box	<u></u> uccep			26 REE
	1/	21 .				P
Name:	Kera	Stephe	nS			
-				- 1		
Office Address:	४३५। ३	Sands poin	t Blud			
_	-+	l				
	lamar	ac		_ , Florida	33321	
-		(City)		(2	(ip code)	
Registered agent's accepta	nce:					
Having been named as regi-	stered agent and to					
designated in this application						
to comply with the provision and accept the obligations of			ina compiete ~	e perjormance	oj my aunes, a	ina 1 am jamular wun
. 0		11/	A			
		4	Beehl	me '		
<del>-</del>		(Registered agent's si	gnature (			

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

Title or Capacity:	Name and Address:	Title or Capacity:		Name and Address:
⊠Manager	Name: KerA Stephens	□Manager	Name:	
□Member	Address: 8341 SAndspoint	□Member	Address:	
□Authorized	Blud BIOZ TAMARAC,	□Authorized		
Person	FL 33321	Person		
□Other	Other	Other	<del></del>	□Other
⊡Manager	Name: Loraine Harrison	□Manager	Name:	
□Member	Address: 829 NW 79th Terrace	□Member		
□Authorized	Plantation FL 33324	□Authorized		<u> </u>
Person		Person		
□Other	Other	□Other		□Other
□Manager	Name:	□Manager	Name:	
□Member	Address:	□Member	Address:	
□Authorized		□Authorized		
Person		Person		
Other	Other	□Other		□Other

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

- 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)
- 10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.

Signature of an authorized person

Ker A Stephen S

Typed or printed name of sugnee



I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "YEP - YOUNG ENTREPRENEUR PLATFORM,

LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS

IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF

THIS OFFICE SHOW, AS OF THE TWENTY-SIXTH DAY OF OCTOBER, A.D. 2020.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "YEP - YOUNG ENTREPRENEUR PLATFORM, LLC" WAS FORMED ON THE TWENTY-FIRST DAY OF NOVEMBER, A.D. 2019.

Authentication: 203934321

Date: 10-26-20