

LD3 000044637

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

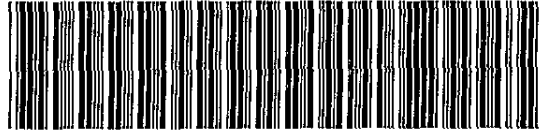
(Business Entity Name)

(Document Number)

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LD3-44637  
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**TRANSMITTAL LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** SHORE TO SHORE Import & Export LLC  
(Name of Limited Liability Company)

The enclosed Articles of Organization and fec(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

JASON M. AUBURY  
(Name of Person)

SHORE TO SHORE Import & Export LLC  
(Firm/Company)

<sup>2031</sup>~~2021~~ SW 20th Avenue C17  
(Address)

Davie FL, 33317  
(City/State and Zip Code)

For further information concerning this matter, please call:

Jason Aubury at (954) 499-2748  
(Name of Person) (Area Code & Daytime Telephone Number)

**STREET ADDRESS:**  
Registration Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, Florida 32399

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

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**ARTICLES OF ORGANIZATION  
FOR  
FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

SHORE TO SHORE IMPORT & EXPORT LLC

**ARTICLE II - Address:**

The mailing address and street address of the principal office of the Limited Liability Company is:

**Principal Office Address:**

2031  
2031 SW 70th Avenue  
C17  
Davie FL 33317

**Mailing Address:**

2031 SW 70th Avenue  
C17  
Davie FL 33317

**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

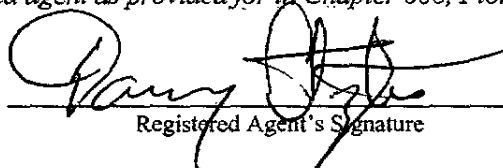
The name and the Florida street address of the registered agent are:

Danny Etzweiler  
Name

11290 Tara Drive  
Florida street address (P.O. Box **NOT** acceptable)

Plantation FLORIDA 33325  
City, State, and 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 608, Florida Statutes..*

  
Registered Agent's Signature

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**ARTICLE IV- Manager(s) or Managing Member(s):**

The name and address of each Manager or Managing Member is as follows:

**Title:**

"MGR" = Manager

"MGRM" = Managing Member

**Name and Address:**

MGR

Jason M. Albury  
3241 Sabal Palm Manor #107  
Davie FL 33024

MGRM

Danny Etzweiler  
11290 Tara Dr.  
Plantation FL 33325

MGRM

Felix Seymour  
#9 Royal Tern Dr.  
P.O. Box F-42042 Freeport, A.B.T.

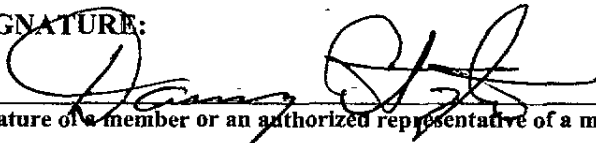
MGRM

Carleta Carolina  
#51 Royal Palm Way  
P.O. Box F-40729 Freeport, A.B.T.

(Use attachment if necessary)

**NOTE: An additional article must be added if an effective date is requested.**

**REQUIRED SIGNATURE:**



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

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Danny Etzweiler  
Typed or printed name of signee

**Filing Fees:**

\$100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

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