Division of Corporations **Electronic Filing Cover Sheet** 

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## FLORIDA LIMITED LIABILITY CO.

EBF TRANSPORTATION LLC

| Certificate of Status | 1        |  |
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| ARTICLE                      | <u> I - Name:</u>   |  | ,  |                       |  |
|------------------------------|---|--|--|-----------------------|--|
| The name of                  | of the Limited Li   | lability Compan                          | y is: (Must end wi   | th the words "Limited | Liability Company                      |
| *L.L.C., or *LLC             | EBE   | Transport                                | lation   | LLC                   |  |
| ARTICLE The mailin Company i | II - Address: g address and st  1 3440 Plantoilic           | NW 5                                     | the principal of the pr |                       | nited Liabilit                         |
| The name Company cons        | and the Florida not serve as its own I Florida registration | street address ( Registered Agent. Yo .) | of the register  | ed agent are: 🗥       | he Limited Liabii<br>other business en |
| -                            | 13440   | NW                                       | 5++  |                       |  |
| -                            | Planta!   | tion                                     | F- C-  | 33325                 |  |
| ARTICLE The name Liability C | and title of each   | _  |  |                       | ne Limited                             |
|                              | Fana  | Perez                                    | CA   | mbr)                  |  |
| •                            |   |  |  |                       | <del>_</del>                           |
|                              |   |  |  |                       |  |
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| e .                          |   |  |  |                       |  |

H16000090925

Required Signatures:

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

In accordance with section 605.0203 (1) (b), Florida Statutes, 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.

Typed or printed name of signee

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..

Registered Agent's Signature (REQUIRED)

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