

1/6/2020

Division of Corporations

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To: Division of Corporations  
Fax Number : (850)617-6381

From: Account Name : THREE K FAST CARRIER SERVICES INC  
Account Number : I20180000033  
Phone : (305)805-3516  
Fax Number : (305)887-5844

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SECRETARY OF STATE  
TALLAHASSEE, FL

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: LOPEZEMPIRE@whoo.com

FLORIDA LIMITED LIABILITY CO.  
LOPEZ EMPIRE TRUCKING LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$125.00

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BUREAU OF COMMERCIAL  
REGISTRATION SERVICES

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JAN 08 2020

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COVER LETTER

TO: New Filing Section  
Division of Corporations

SUBJECT: LOPEZ EMPIRE TRUCKING LLC  
Name of Limited Liability Company

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

Please return all correspondence concerning this matter to the following:

FIRST NAME = ADRIAN LAST NAME = LOPEZ CORTIZO  
Name of Person

LOPEZ EMPIRE TRUCKING LLC  
Firm/Company

123 SPRINGDALE CIR  
Address

PALM SPRINGS, FL 33461  
City/State and Zip Code

LOPEZEMPIRE@YAHOO.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ADRIAN R. LOPEZ CORTIZO at ( 786 ) 828-2726  
Name of Person Area Code Daytime Telephone Number

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 (additional copy is enclosed)
- \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

**Mailing Address**  
New Filing Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address**  
New Filing Section Division  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

**LOPEZ EMPIRE TRUCKING LLC**

(Must contain the words "Limited Liability Company," "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:

**123 SPRINGDALE CIR  
PALM SPRINGS, FL 33461**

Mailing Address:

**123 SPRINGDALE CIR  
PALM SPRINGS, FL 33461**

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

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

**ADRIAN R. LOPEZ CORTIZO**

Name

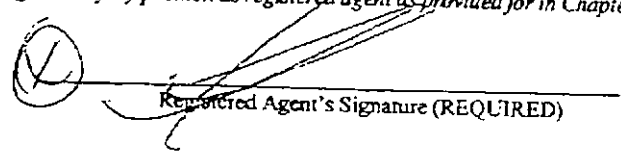
**123 SPRINGDALE CIR**

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

**PALM SPRINGS, FL 33461**

City State 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 605, F.S.

  
Registered Agent's Signature (REQUIRED)

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**ARTICLE IV-**

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

**Title:**

"AMBR" = Authorized Member

"MGR" = Manager

**Name and Address:**

MGR

ADRIAN R. LOPEZ CORTIZO

123 SPRINGDALE CIR  
PALM SPRINGS, FL 33461

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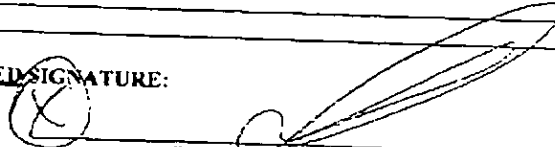
(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: 01-06-2020 (OPTIONAL)  
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

**ARTICLE VI:** Other provisions, if any.  
**NONE**

**REQUIRED SIGNATURE:**



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

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.

ADRIAN R. LOPEZ CORTIZO

Typed or printed name of signer

**Filing Fees:**

- \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

SECRETARY OF STATE  
TALLAHASSEE, FL

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