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

From: Account Name : THREE K FAST CARRTER SFRVTCFS INC
Account Number : 120180000033
Phone : (305)805-3516
Fax Number : (305)887-5844

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

Email Address: TS.TOKAL@gmail.com

FLORIDA LIMITED LIABILITY CO. LATIN EXPRESS TRANSLATION LLC

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

RECEIVED
2023 MAY 15 PM 3:42
CORPORATIONS
COMMERCIAL
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2023 MAY 15 AM 12:59
TALLAHASSEE, FL
DIVISION OF STATE

May. 15. 2023 12:15PM

No. 7610 P. 22
112-11117573

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: LATIN EXPRESS TRANSLATION 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:

IGNACIO CALIXTE
Name of Person

TAXES & BUSINESS SERVICES LLC
Firm/Company

8500 NW 30TH TER
Address

DORAL, FL 33122
City/State and Zip Code

TBS.DORAL@GMAIL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

IGNACIO CALIXTE 954 9977268
Name of Person at 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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2023 MAY 15 AM 12:53
TALLAHASSEE, FL
DIVISION OF STATE

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

LATIN EXPRESS TRANSLATION 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:

8500 NW 30TH TER
DORAL, FL 33122

Mailing Address:

8500 NW 30TH TER
DORAL, FL 33122

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:

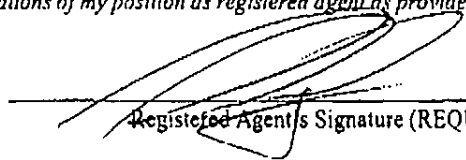
LUBIN CASTELLANO
Name

8500 NW 30TH TER
Florida street address (P.O. Box NOT acceptable)

DORAL FL 33122
City State Zip

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2023 MAY 15 AM 12:53
CLERK OF STATE
TALLAHASSEE, FL

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, 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)

(CONTINUED)

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

LUBIN CASTELLANO
7414 NW 107TH CT
DORAL, FL 33178

MGR

ABELARDO ACHKAR
18038 SW 12TH CT
PEMBROKE PINES, FL 33029

(Use attachment if necessary)

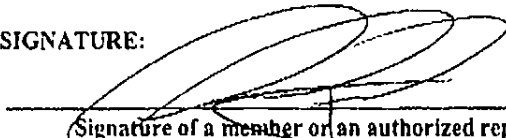
ARTICLE V: Effective date, if other than the date of filing: 05/12/2023 (OPTIONAL)
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

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.
ANY AND ALL LAWFUL BUSINESS

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2023 MAY 15 AM 12:53
DEPARTMENT OF STATE
TALLAHASSEE, FL

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.

LUBIN CASTELLANO
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)