

TRANSMITTAL LETTER

L0100000000606

Department of State  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

MJH

SUBJECT: Specialized Shipping International  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX) LLC

800003531638-- 1  
-01/10/01--01077--003  
\*\*\*\*155.00 \*\*\*\*155.00

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

☐ \$70.00  
Filing Fee

☐ \$78.75  
Filing Fee  
& Certificate of Status

☐ \$78.75  
Filing Fee  
& Certified Copy

☐ \$87.50  
Filing Fee,  
Certified Copy  
& Certificate of  
Status

ADDITIONAL COPY REQUIRED

FROM:

Perez, Behar, Assoc.  
Name (Printed or typed)

13935 NW 1st Ave  
Address

Miami, FL 33168  
City, State & Zip

305-688-9694  
Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
01 JAN 10 AM 10:28

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name:

The name of the Limited Liability Company is:

**SPECIALIZED SHIPPING INTERNATIONAL, LLC**

## ARTICLE II - Address:

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

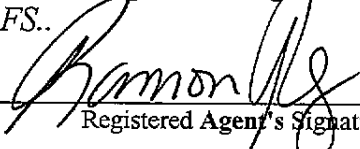
**13935 NW 1st Avenue  
Miami, Fl. 33168**

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

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

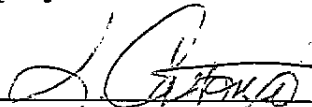
**Perez, Behar & Associates, PA  
13935 NW 1st Avenue  
Miami, Fl. 33168**

*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, FS..*

  
\_\_\_\_\_  
Registered Agent's Signature

## Article IV - Management (Check box if applicable.)

☒ The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

  
\_\_\_\_\_  
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.)

**Lourdes Castano**  
Printed Name of Signee

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS