-L03000005159

ROBERT F Newmand (Requestor's Name)
(Requestor's Name)
4433 BABS Street (Address)
(Address)
(Address) 33617
813 62-0 - 1955 (City/State/Zip/Phone #)
(City/State/Zip/Phone #)
A ONE TRANSPORT LLC. (Business Entry Name)
A DNE TRANSPORT LLC
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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Office Use Only



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DIAISION OF CORPORATION

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ARTICLES OF ORGANIZATION FÖR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:
The name of the Limited Liability Company is:
A ONE TRANSPORT, LLC
ARTICLE II - Address:
The mailing address and street address of the principal office of the Limited Liability Company is:
p. 0 Box 291744
P. D BOY 291744 Thomps PL 3368T
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
The name and the Florida street address of the registered spent and
The name and the Florida street address of the registered agent are:
KOBERT Newman AS TO
HOBERT Newman HIST 2 10
Florida street address (P.O. Box NOT acceptable)
City, State, and Zip
, 0.1, 5
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, F.S
that Alexand
Registered Agent's Signature
Registered Agent's dignature
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.
(An addist CD) at 10 and 10 an
(An additional article must be added if an effective date is requested)
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.)
Typed or printed name of signee
Typed or printed name of signee
Filing Face:

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)