

L03000006823

1ayo Sowande
(Requestor's Name)

4139 Stag Run Ct
(Address)

Tallahassee, FL 32311
(Address)

Tallahassee, FL 32311
(City/State/Zip/Phone #)

☐ PICK-UP

☒ WAIT

☐ MAIL

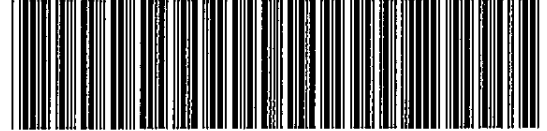
ABI Transport Service
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status ☒

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TALLAHASSEE, FLORIDA

TAYO SOWANDE
4139 Stag Run Court
Tallahassee, FL 32311
(850) 383-8442

February 25, 2003

State of Florida
Dept of States
Registration Section
Division of Corporations
409 E. Gaines St
Tallahassee, FL 32399

Dear Sir/Madam,

I am submitting this article of organization to register a business named, ABI Transport Service as a limited liability company in the state of Florida.

Kindly accept this application.

Sincerely,


Tayo Sowande

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TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:
ABI TRANSPORT SERVICE LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:
4139 STAG RUN COURT, TALLAHASSEE, FL 32311

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

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

TAYO SOWANDE

Name


4139 STAG RUN COURT

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

TALLAHASSEE, FL 32311

City, State, and 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 608, F.S.


Registered Agent's Signature

(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.)

TAYO SOWANDE

Typed or printed name of signer

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)

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