

L03000026975

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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L03-26975

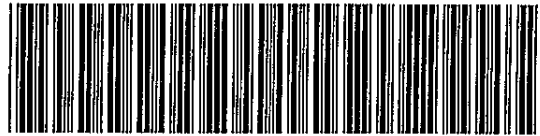
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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DIVISION OF CORPORATIONS  
03 JUL 21 AM 10:28

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EFFECTIVE DATE  
7/17/03

## TRANSMITTAL LETTER

Registration Section  
Division of Corporations  
P O BOX 6327  
Tallahassee, FL 32314

SUBJECT: TWIN J. TRANSPORT, LLC

Dear Sir or Madam:

Please find enclosed for filing one original and one copy of the ARTICLES OF ORGANIZATION. Also enclosed is a check in the amount of \$ 160.00 made payable to: Florida Department of State for the filing fee, designation of Registered Agent, certified copy, and certificate of status. If you need any additional information I can be reached at: .352-669-4463.

Please return to: TWIN J. TRANSPORT LLC  
C/O JOE FISHER - Registered Agent  
19002 THOMAS AVENUE  
ALTOONA, FL 32702

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DIVISION OF CORPORATIONS  
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NOTE: The original and one copy of the articles are enclosed.

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I NAME

The name of the Limited Liability Company is: TWIN J. TRANSPORT, LLC

## ARTICLE II ADDRESS

The mailing address and street address of the principal office of the Limited Liability Company is:  
19002 THOMAS AVENUE in ALTOONA, FL 32702.

## ARTICLE III EFFECTIVE DATE

The effective date of the Limited Liability Company shall be July 17, 2003.

## ARTICLE IV MEMBERS/MANAGERS

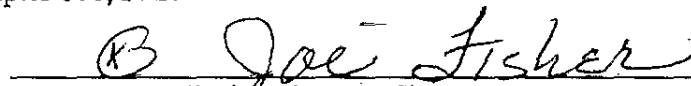
JOE FISHER/MGR/MEMBER  
19002 THOMAS AVENUE  
ALTOONA, FL 32702

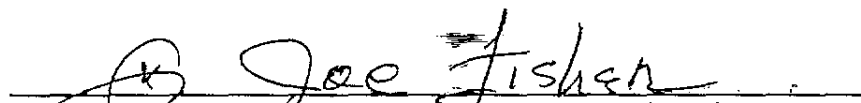
JAMES WHITEHEAD/MGR/MEMBER  
19002 THOMAS AVENUE  
ALTOONA, FL 32702

## ARTICLE V REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE:

The name of the Florida street address of the registered agent are:  
JOE FISHER/ 19002 THOMAS AVENUE/ ALTOONA FL 32702

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

  
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.)

Joe Fisher

Typed or printed name of signee

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7/17/03