

L04000013133

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

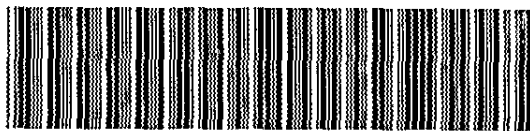
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000028276810

02/09/04--01033--007 **130.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

34 FEB - 9 PM 3:12

FILED

L04-13133
OK

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: GULF BEACH TRUCKING, LLC
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

DEBI K FOX
(Name of Person)

TRUCKER'S BUSINESS SERVICES
(Firm/Company)

12617 S MCLOUD RD
(Address)

MCLOUD, OK 74851
(City/State and Zip Code)

For further information concerning this matter, please call:

DEBI FOX at (405) 386-6437
(Name of Person) (Area Code & Daytime Telephone Number)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

06 FEB -9 PM 3:12

FILED

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

**ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I - Name:

The name of the Limited Liability Company is:

GULF BEACH TRUCKING, LLC

ARTICLE II - Address:

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

Principal Office Address:

5610 GALVEZ RD

PENSACOLA, FL 32507-8517

Mailing Address:

12617 S MCLOUD RD

MCLOUD, OK 74851-8509

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

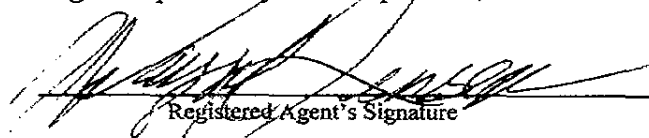
The name and the Florida street address of the registered agent are:

Wayne L Jensen
Name

5610 Galvez Rd
Florida street address (P.O. Box **NOT** acceptable)

Pensacola FLORIDA 32507-8517
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, Florida Statutes..


Registered Agent's Signature

04 FEB - 9 PM 3:12
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

WAYNE L JENSEN

5610 GALVEZ RD

PENSACOLA, FL 32507-8517

MGR

DEBI K FOX

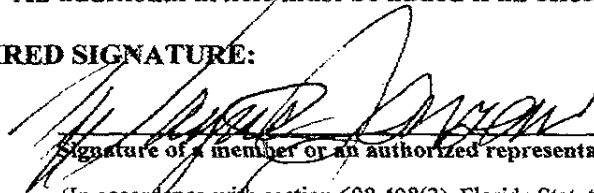
12617 S MCLOUD RD

MCLOUD, OK 74851-8509

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED 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.)

WAYNE L JENSEN

Typed or printed name of signee

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

04 FEB -9 PM 3:12

FILED

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)