104000091343

(Re	equestor's Name)	
(Ac	dress)	
(Ac	ldress)	***
(Ci	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bı	usiness Entity Nam	e)
(Do	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
12/10	FL	lC
	Office Use Only	v



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TRANSMITTAL LETTER

(Name of Limited Liability Company) of Organization and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following:
-
Please return all correspondence concerning this matter to the following:
i touse totali ali correspondence concerning and matter to the rone integ.
JAN G. HAAVE
(Name of Person)
HAPPY TRANSPORT, LLC
(Firm/Company)
7715 SW 86 STREET, SUITE 106
(Address)
MIAMI, FL 33143
(City/State and Zip Code)

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:		
HAPPY TRANSPORT, LLC		
ARTICLE II - Address: The mailing address and street address of the principal of	office of the Limited Liability Company is:	
Principal Office Address:	Mailing Address:	
7715 SW 86 STREET, SUITE 106	7715 SW 86 STREET, SUITE 106	
MIAMI, FL 33143	MIAMI, FL 33143	
ARTICLE III - Registered Agent, Registered Office, The name and the Florida street address of the registered	~ ~ ~	
ERICK A. ESPINOSA-EPPSTEIN	TALL	
Name	O4 DEC	
250 CATALONIA AVENUE, SUITE	501	
Florida street address (P.O. Box NC	ORIDA 33134	
CORAL GABLES FLO	ORIDA 33134	
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 60%, Florida Statutes..

Registered Agent's Signature

Page 1 of 2 (CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager	Name and Address:	
"MGRM" = Managing Member		
MGRM	JAN G. HAAVE	
	7715 SW 86 STREET, SUITE 106	
	MIAMI, FL 33143	
MGRM	ELBA HAAVE	
-	7715 SW 86 STREET, SUITE 106	·
en e	MIAMI, FL 33143	<u> </u>
		
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· · · · · · · · · · · · · · · · · · ·	-	
(Use attachment if necessary)		
(Ose attachment if necessary)		
NOTE: An additional article must be	be added if an effective date is requested.	
	1	
REQUIRED SIGNATURE:		
(1) - (1)		•
Signature of a member or at	authorized representative of a member.	~ =
/		
	18.408(3), Florida Statutes, the execution a affirmation under the penalties of perjury true.)	
JA	N G. HAAVE	
	printed name of signee	E ¹ <u>IR. 1.11</u>

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)