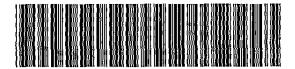
LOS 000052534

(Rec	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	//State/Zip/Phone	<u> </u>
PICK-UP	 WAIT	MAIL
(Bus	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to I	Filing Officer:	

Office Use Only



200054517432

05/19/05--01016--009 **125.00

SECRETARIA SAFE

TRANSMITTAL LETTER

	Registration Sec Division of Cor							
SUBJEC	T: Landstar	Information Services, LLC	IT: LT: O		:			
		(Name of Limited	Liability Compa	ny)				
The encle	osed Articles of	Organization and fee(s) are su	abmitted for filing	<u>,</u>				
Please re	turn all correspo	ondence concerning this matter	r to the following	:		SECR	05 H	
	Todd Bar	field				E.	~	-
		·	Vame of Person)			SSEE, FL	05 MAY 19 PM 1: 5	ן ן
Landst	tar Information	Services, LLC	Firm/Company)	·		_윤호	U1	
		(1	rim/Company)			D, É	0	
	1100 SE 589	h Avenue						
			(Address)			_ .	•	
	Ocala	, Florida 34471 (City/	State and Zip Code)				
For furth	er information o	concerning this matter, please	call:					
Todd Ba	arfield		at (352	861-2522				
		of Person)		e & Daytime Te	elephone Numb	er)		
F (•				
Enclose	d is a check to	r the following amount:						
Z \$125.0	00 Filing Fee	☐ \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 F. Certified Cop. (additional copy	у	S160.00 Certificate Certified (additional co	of Status Copy	s &	
	Regist Divisio 409 E.	ET ADDRESS: ration Section on of Corporations Gaines Street assee, Florida 32399		MAILING A Registration S Division of Co P.O. Box 632 Tallahassee, F	ection orporations 7			

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Landstar Information Services, LLC	
ARTICLE II - Address: The mailing address and street address of the p	orincipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1100 SE 58th Avenue	1100 SE 58th Avenue
Ocala, Florida 34471	Ocala, Florida 34471
ARTICLE III - Registered Agent, Registere The name and the Florida street address of the	CR.
Todd Barfield	
Name	PA E
1100 SE 58th Avenue	OR OR
Florida street ad	idress (P.O. Box NOT acceptable)
Ocala, Florida 34471	FL
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

(CONTINUED)

Page 1 of 2

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

SRM	Todd Barfield	
	1100 SE 58th Avenue	
	Ocala, Florida 34471	
<u> </u>		
		

(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.)

05 MAY 19 PH 1:50

Todd Barfield

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)