# 05000068152

### Florida Department of State

**Division of Corporations** Public Access System

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To:

Division of Corporations

Fax Number : (850)205-0383

From:

Account Name : EMPIRE CORPORATE KIT COMPANY Account Number : 072450003255

Phone : (305) 634-3694

Fax Number

: (305)633-9696

LIMITED LIABILITY COMPANY

southern trucking, llc

neument DCC Examiner **UCC** Updater **!!ofater** DCC Verifyer DCC ം no .led<u>n</u>ement

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

# 3

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

ARTICLE I - Name:			
The name of the Limited Liability Company is:			•
Southern Cross Tru	cling, LLC	,	
ARTICLE II - Address: The mailing address and street address of the pr		:	pany is:
Principal Office Address:	Mailing Address:		
Homestord, El. 33030	100 NE 6	Avenue	
HOMESTOWN FC SOUDO	THERMAN		
ARTICLE III - Registered Agent, Registered	l Office, & Registered	l Agent's Signature	:
The name and the Florida street address of the r	registered agent are:	<u> </u>	
Homeshard City, State, a	•	HASSEE	
Having been named as registered agent and to liability company at the place designated in tregistered agent and agree to act in this capacity statutes relating to the proper and complete per accept the obligations of my position as regional accept the acceptance.	his certificate, I hereby y. I further agree to co vrformance of my duties	accept the appointme mply with the provision, and I am familiar w	nt ass ns of all ith and
Registered Agent'	s Signature	•	

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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 "MGRM" = Managing Member	Name and Address:		
Nanaging Member	Sara Iglesias 100 N.E. 6 Avenue, #57 Homestead, FL 33030	<u>=</u>	
		_	
		_	
, .		_	
		_	
		<u>-</u>	
Use attachment if necessary)		<b>-</b> .	

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

REQUIRED SIGNATURE:

Signature of a member or an approximed representative of a member.

(In accordance with section 648.408(3), Florida Statutes, the execution of this document constitutes in affirmation under the penalties of perjury that the facts stated herein are true.)

ped 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)

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