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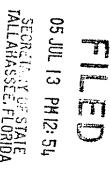
(Req	uestor's Name)		_
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PICK-UP	☐ WAIT	MAIL	
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Certified Copies	Certificates	of Status	
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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations
SUBJECT: KALI TRANSPORT 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:
PETER G. ZILINSKI. (Name of Person)
KALI TRANSPORT LLC (Firm(Company)
1941 E. Coper Dr. (Address)
DEltonp, FL 32725 (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Person) (Name of Person) (Area Code & Daytime Telephone Number) (To The Person of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$125,00 Filing Fee \$\Bigcup \\$130.00 Filing Fee & \$\Bigcup \\$155.00 Filing Fee & \$\Bigcup \\$160.00 Filing Fee, Certificate of Status & Certificate of Status & Certified Copy (additional copy is enclosed)
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:

- Rali Iransport LLC

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

1941 E. COOSER Dr Deltona, FL 32725

DeltonA, FI

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

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

Name

Florida street address (P.O. Pour NOT accomptable

Selton A Fl E 33745

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 familia. With and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..

Registered Agent's Signature

(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>	Name and Address:
"MGR" = Manager "MGRM" = Managing Member	<u>,</u>
MGR	PETER G. ZILINSKI 1941 E Cooper Dr DELtonA FL 32725
	
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(Use attachment if necessary)	
NOTE: An additional article must l	oe added if an effective date is requested.
REQUIRED SIGNATURE:	
-	or an authorized representative of a member. ion 608.408(3), Florida Statutes, the execution
of this document constit that the facts stated he	utes an affirmation under the penalties of perjury

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)

Typed or printed name of signee