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Manie M. Half (Requestor's Name)		
5833 Marley Lang		
(Address)		
(Address)		
Inllabase II. 32309-893-4011 (City/State/Zip/Phone #)		
(City/State/Zip/Pnone #)		
PICK-UP WAIT MAIL		
Hallis Iranifortation, LLC (Business Entity Name)		
(= ====================================		
(Document Number)		
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Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		
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DIVISION OF SUMPORATION

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Hall's Transportation, LLC (Must end with the words "Limited Liability Compley, "Limited Company" or their abbreviation "LLC," or "L.C.,")		
ARTICLE II - Address: The mailing address and street address of the pri	ncipal office of the Limited Liability Company is:	
Principal Office Address: 5833 Marblewood Lane Tall, Fl 32309	Mailing Address: (Same)	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registe business entity with an active Florida registration.)	red Agent. You must designate an individual or another	
The name and the Florida street address of the registered agent are: Mamie H. Hall Florida		
Florida street addr Tallahassee, City, State, an	ess (P.O. Box NOT acceptable)	

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 (REQUIRED)

(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:	
<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	Mamie M. Hall 5833 Marbhural Ln Tallahasse, Fl 32309
MGRM	Oscar Hall, SR 5838 Marbhwood Ln Tallahasse, FL 32309
MGRM	Oscar Hall, JR 3989-49 Woodville Hour Tallahassee, FL 32311
MGRM	ERIKA HALL 600 Victory Garden DR. J83 Tallahasse, FL 3230
(Use attachment if necessary)	
	the date of filing: (OPTIONAL) t be specific and cannot be more than five business days prior
REQUIRED SIGNATURE:	
Manue Signature of a mem	M. Hall iber or an authorized representative of a member. His Second
of this document con	section 608.408(3), Florida Statutes, the execution stitutes an affirmation under the penalties of perjury and herein are true.)
Filing Fees:	Typed or printed name of signee $\frac{1}{2}$
\$125.00 Filing Fee for Articles of Ot of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Option	