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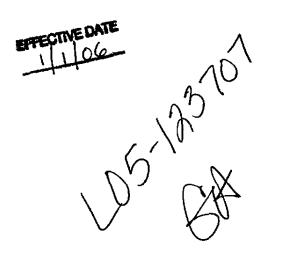
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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COVER LETTER

TO: Registration Se Division of Co				
SUBJECT: STRA	IGHT FORWARD TRAN			_
	(Name of Limited	Liability Company)		
	Organization and fee(s) are su ondence concerning this matter	-		
QUINTON	C. PROSSER			
· · · · · · · · · · · · · · · · · · ·	(1	are of Person)		
STRAIGH	T FORWARD TRANSPO	RT LLC		
	()	Firm/Company)		
1693 NO	RTHWEST 193rd STR	EET		
		(Address)		
MIAMI,	PL 33169			
	(City/	State and Zip Code)		25 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8
				2005 DEC 30 SECRETARY ALLAHASSE
For further information concerning this matter, please call:				
QUINTON C. P	ROSSER	ar(<u>786</u>) 385 -76 5	: 6	ma
	of Person)	(Area Code & Daytime Tel		FS: PH
	•			
Enclosed is a check for	the following amount:			DA IS
□ \$125.00 Filing Fee	□ \$130.00 Filing Fee &	☐ \$155.00 Filing Fee &	፟ \$160.00 Fi	ling Fee.
-	Certificate of Status	Certified Copy	Certificate of St	
		(additional copy is enclosed)	Certified Copy (additional copy is	
*				,
	Mailing Address Registration Section	Streat/Courier Address Registration Section		

Mailing Address
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

STRAIGHT FORWARD TRANSPORT LLC

(Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or "L.C.,")

ARTICLE II - Address:

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

Principal Office Address: 1693 NORTHWEST 193rd STREET MIAMI, FL 33169 Mailing Address: 1693 NORTHWEST 193rd STREET MIAMI, FL 33169

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

LARRY R. HANDFIELD

Name

4770 BISCAYNE BLVD, SUITE 1200

Florids street address (P.O. Box NOT acceptable)

MTAMT

FL 33137

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 (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:

Title:	Name and Address:
"MGR" = Manager "MGRM" = Managing Member	
	QUINTON C. PROSSER
MGRM	1693 NORTHWEST 193rd STREET
	MIAMI, FL 33169
	72
	PI 2005 DEC SECRUTA TALLAHAS
	AND DEC
	FILED TO PH 3: 13 TARY OF STATE ASSEE, FLORIDA
·	LORI 3:
(Use attachment if necessary)	
RTICLE V: Effective date, if other than the if an effective date is listed, the date must be are of or 90 days after the date of filing.)	date of filing: 1/1/2005 (OPTIONAL) be specific and cannot be more than five business days
REQUIRED SIGNATURE:	
Signature of a member	My - Authorized Representative of a member.
(In accordance with sect of this document constit that the facts stated be	tion 608.408(3), Florida Statutes, the execution tutes an affirmation under the penalties of perjury are true.)

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)

Page 2 of 2

OUINTON C. PROSSER

Typed or printed name of signee