## 107000070521

| (Re                                     | questor's Name) |           |
|---|-----------------|-----------|
| (Address)                               |                 |           |
| (Address)                               |                 |           |
| (City/State/Zip/Phone #)                |                 |           |
| PICK-UP                                 | ☐ WAIT          | MAIL      |
| (Business Entity Name)                  |                 |           |
| (Document Number)                       |                 |           |
| Certified Copies                        | Certificates    | of Status |
| Special Instructions to Filing Officer: |                 |           |
|   |                 |           |
|   |                 |           |
|   |                 |           |

Office Use Only



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DIVISION OF CORPORATIONS

## **COVER LETTER**

TO:

**Registration Section** 

| Division of Corporations   |
|--|
| SUBJECT: Burgos-Bocash Logistics 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:  |
|  |
| Jan Bocash (Name of Person)  |
| 2 2  |
| Burgos-Bocash Logistics LLC (Firm/Company)   |
| 1501 Nestlewood Trail  |
| (Address)  |
| Orlando FL 32837   |
| (City/State and Zip Code)  |
| (Address)  Orlando FL 32837  (City/State and Zip Code)  For further information concerning this matter, please call:   |
| Tan Bocash at ( 407 ) 493-2967 (Name of Person) (Area Code & Daytime Telephone Number)   |
| Enclosed is a check for the following amount:  |
| \$125.00 Filing Fee \$\times \text{\$130.00 Filing Fee & S155.00 Filing Fee & Certificate of Status}\$  Certificate of Status \$\text{Certified Copy (additional copy is enclosed)}}  Certified Copy (additional copy is enclosed) |
| Mailing Address Registration Section  Street/Courier Address Registration Section  |

Division of Corporations

P.O. Box 6327 Tallahassee, FL 32314 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:  |   |
| Burgos-Bocash Logistics LLC (Must end with the words "Limited Liability  | ry Company, "L.L.C.," or "LLC.")  |
| ARTICLE II - Address:  | ·   |
|  | ncipal office of the Limited Liability Company is:  |
|  |   |
| Principal Office Address:  | Mailing Address:  |
| Orlando, FL 32837  | 1501 Nestlewood Trail Orlando, FL 32837   |
| ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.) | Office, & Registered Agent's Signature:   |
| The name and the Florida street address of the re  | egistered agent are:  |
| Jan Borash   |   |
| Name   |   |
| 1501 Westlewood To   | ress (P.O. Box NOT acceptable)  |
| Orlando  | FI. 3283T   |
| City, State, ar  | FL 32837<br>nd Zip  |
| liability company at the place designated in the<br>registered agent and agree to act in this capacity<br>statutes relating to the proper and complete per       | ccept service of process for the above stated limited is certificate, I hereby accept the appointment as I further agree to comply with the provisions of all formance of my duties, and I am familiar with and tered agent as provided for in Chapter 608, F.S |

(CONTINUED)
Page 1 of 2

Registered Agent's Signature (REQUIRED)

## • 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   | Brian P. Bocash 1501 Nestlewood Trail Orlando, FL 32837 |  |
| MGRM   | Jan Bocash  1501 Nestlewood Trail  Orlando FL 32837     |  |
| MGRM   | Alberto Burgos H41 Jay Court Kissimmer, FL 34759 H3759  |  |
| <del> </del>   | 32  |  |
| (Use attachment if necessary)  |   |  |
| ARTICLE V: Effective date, if other than the date of filing: (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.) |   |  |
| REQUIRED SIGNATURE:  |   |  |
| Signature of a member of   | r 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.)                                   |   |  |
| Jan Bocash 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)

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