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Division of Corporations



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Division of Corporations

Fax Number

: (850)205-0383

From:

Account Name : A 1 A CORPORATE SERVICES, INC.

Account Number: I20010000247

Phone

: (800)494-3124

Fax Number

(305)675-2811

# FLORIDA/FOREIGN LIMITED LIABII

# L4 TRUCKING, LLC

Certificate of Status	O O
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### ARTICLES OF ORGANIZATION FOR A FLORIDA LIMITED LIABILITY COMPANY

In compliance with Chapter 608,F.S.

#### <u>ARTICLE I NAME</u>

The name of the Limited Liability Company is: L4 TRUCKING, LLC

The mailing address and street address of the principal office of the Limited Liability Company Is: Liability Company is.
3191 WEST NINE MILE ROAD

PENSACOLA FL 32534

# REGISTERED AGENT SIGNATURE

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

PAUL LAVALLEE

3191 WEST NINE MILE ROAD

PENSACOLA FL 32534

Having been named as registered agent 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..

LAVALLEE Registered Agent's Signature

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#### ARTICLE IV MANAGEMENT

The Limited Liability Company is to be managed by one or more members and is, therefore, a Member-Managed Company.

#### ARTICLE V MEMBERS (optional)

MANAGING MEMBER

PAUL R. LAVALLEE .

3191 WEST NINE MILE ROAD

PENSACOLA FL 32534

MANAGING MEMBER

ROBERT W. LAVALLEE

3191 WEST NINE MILE ROAD

PENSACOLA FL 32534

MANAGING MEMBER
PAUL A. LAVALLEE
3191 WEST NINE MILE ROAD
PENSACOLA FL 32534

MANAGING MEMBER BOBBY D. LAVALLEE 3191 WEST NINE MILE ROAD PENSACOLA FL 32534

Signature of a member or 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.

PAUL LAVALLEE

Typed or printed name of signee

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SECRLIARY OF STATE
SECRLIARY OF FLORIDI