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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ROBERT C. MEYER, P.A.

2223 Coral Way
Miami, Florida 33145

TELEPHONE: (305)285.8838

FACSIMILE: (305) 285.8919

July 26, 2007

Secretary of State
Florida Department of State
P. O. Box 6327
Tallahassee, FL 32314

RE: Transgo Brokers, LLC

Dear Sir or Madam:

Enclosed is a check for \$125.00 as well as the Articles of Organization for Florida Limited Liability Company for the above-referenced entity.

Should you have any questions, please do not hesitate to call the undersigned.

Sincerely,


Robert C. Meyer, Esq.

RCM/mg

Enc.: Articles of Organization for Florida Limited Liability Company for Transgo Brokers, LLC

cc: Client

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I – Name:

The name of the Limited Liability Company is:

TRANSGO BROKERS, 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:

987 S.E. 11th Place
Hialeah, FL 33010

Mailing Address:

3874 Lyons Road, Apt #307
Coconut Creek, FL 33073

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:

CHARLENET BENOIT

Name

3874 LYONS ROAD, Apt. #307

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

COCONUT CREEK, FLORIDA 33073

FL 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, [hereby accept the appointment as registered agent and agree to act in this capacity. [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)

ARTICLE IV – Manager(s) or Managing Member(s):

The name and address of each Manger or Managing Member is as follows:

Title: MGR

Charlenet Benoit
3874 Lyons Road, #307
Coconut Creek, FL 33073

Name and Address: "MGR" = Manager "MGRM" = Managing Member
(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 our 90 days after the date of filing.)

REQUIRED SIGNATURE:



Signature of Member or Authorized Representative of the 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.)

NAME: BENOIT CHARLENET
(Typed or Printed Name of Signee)

\$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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TALLAHASSEE, FLORIDA