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SECRETARY OF STATE

COVER LETTER

TO: Registration Section Division of Corporations					
SUBJECT: Russell S. Mason Logistics					
30202011. <u></u>	(Name of Limited I	iability Company)	1		
The enclosed Articles of Organization and fee(s) are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
Russell	S. Mason				
	(Na	me of Person)	, ,		
Russell	S. Mason Logistics				
·	(Fir	m/Company)			
2524 N.	Mohawk Dr. E.				
	,	(Address)			
Avon Pa	rk, FL 33825				
	(City/St	ate and Zip Code)			
For further informati	on concerning this matter, please ça	Il:			
Russell S. Mason at (863 443-0386			6		
(Na	me of Person)	(Area Code & Daytime Tel	ephone Number)		
Enclosed is a check	for the following amount:				
\$125,00 Filing Fe	e \$\square\$\$130.00 Filing Fee & \$\square\$\$ Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporation Clifton Building 2661 Executive Center C Tallahassee, FL 32301			

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:				
The name of the Limited Liability Company is:				
Russell S. Mason Logistics, LLC				
(Must end with the words "Limited Liabil	ity Company, "L.L.C.," or "LLC.")			
ARTICLE II - Address: The mailing address and street address of the pr	incipal office of the Limited Liability Company is:			
Principal Office Address:	Mailing Address:			
2524 N. Mohawk Dr. E.	2524 N. Mohawk Dr. E.			
Avon Park, FL 33825	Avon Park, FL 33825			
,	· · · · · · · · · · · · · · · · · · ·			
business entity with an active Florida registration.) The name and the Florida street address of the r Russell S. Mason. Name	egistered agent are:			
2524 N. Mohawk Dr.				
	dress (P.O. Box <u>NOT</u> acceptable)			
Avon Park, FL 33825 _{FL}				
City, State, and Zip				
liability company at the place designated in t registered agent and agree to act in this capacit statutes relating to the proper and complete pe	accept service of process for the above stated limited his certificate, I hereby accept the appointment as y. I further agree to comply with the provisions of all rformance of my duties, and I am familiar with and stered agent as provided for in Chapter 608, F.S			
Registered Agent's Signat	ure (REQUIRED)			

(CONTINUED)
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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		-
MGR	Russell S. Mason	
	2524 N. Mohawk Dr. E.	
	Avon Park, FL 33825	
MGRM	Lisa Mason	
	2524 N. Mohawk Dr. E.	
	Avon Park, FL. 33825	
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This is a series and the series are a series as a series are a series as a series are a series 		
		,
		1
(Use attachment if necessary)		
ICLE V: Effective date, if other tha	n the date of filing: 8/8/07	(OPTIONAL)
p effective date is listed, the date m 90 days after the date of filing.)	ust be specific and cannot be more the	an five business days prjo
REQUIRED SIGNATURE:		
\wedge		
. []		

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.)

Russell S. Mason

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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