Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : FIELDSTONE LESTER SHEAR & DENBERG

Account Number : I19990000180

Phone : (305)357-5775

Fax Number

: (305)357-5534

DRIDA/FOREIGN LIMITED LIABILITY CO. INTEGRAL LOGISTICS HOLDINGS, LLC

Certificate of Status	0
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H0700028801.4 3 ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

INTEGRAL LOGISTICS HOLDINGS, LLC

ARTICLE II - Address:

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

4676 North Hiatus Road Sunrise, FL 23351

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

Ronald Fieldstone

201 Alhambra Circle, Suite 601
Florida street address (P.O. Box NOT acceptable)

Coral Gables, VL 33134 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 capabily. I further agree to comply with the provisions of all statutes reliables to the proper and complete performance of my dutter, and I am familiar with and accept the obligations of my position afregistered agent as provided for in Chapter and I am

Registered Agent's Signature

Article IV - Management (Check box if applicable.)

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

(An additional article must be added if an effective date is requested)

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.)

YIGAL HAREL, Authorized Representative
Typed or printed name of signed

MICHAEL P. REYNOLDS. Authorized Representative

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