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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: DEMO TRANSPORT, L. L.C. (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:
ADALBERTO HERNANDEZ
(Name of Person)
(Firm/Company)
8895 SW 147 AVE. #1219
(Address)
MIAMI FL 33196
(City/State and Zip Code)
For further information concerning this matter, please call:
101 april 400 4107 355 1102 5110
ADAL BERTO HERNANDEZat (305) 423-5418 (Name of Person) (Area Code & Daytime Telephone Number)
, , , , , , , , , , , , , , , , , , ,
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\bigcup \\$130.00 Filing Fee & \bigcup \\$155.00 Filing Fee & \bigcup \\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) 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 Corporations Clifton Building Tallahassee, FL 32314 Tallahassee, FL 32301

ARTICLES OF ORGANIZATION OF

DEMO TRANSPORT, L.L.C.

ARTICLE I-NAME

The name of this Organization is DEMO TRANSPORT, L.L.C.

ARTICLE II-DURATION

This Organization shall have a perpetual existence commencing on the Date of Filing.

ARTICLE III-PURPOSE

This Organization may engage in any activity or business permitted under the laws of the United States and the State of Florida.

ARTICLE IV - INITIAL REGISTERED OFFICE AND AGENT

The name of the initial registered agent of this Organization is Adalberto Hernandez and the street address of the initial registered office of this Organization is 8895 SW 147th, #1219, Miami, Florida 33196.

ARTICLE V - INITITAL BOARD OF DIRECTORS

This Organization shall have one (1) Director initially. The number of Directors may be increased or decreased from time to time by the By-Laws, but shall never be less than one (1). The name(s) and address(es) of the initial Director(s) are:

than one (1). The name(s) and address(es) of the initial Director(s) are:

NAMES:

ADDRESSES:

Adalberto Hernandez

8895 SW 147th Ave., #1219,

Miami, Florida 33196

ARTICLE VI – LAWS

The By-Laws of this Organization may be adopted, altered, amended or repealed by the Director(s).

ARTICLE VII - INDEMNIFICATION

The Organization shall indemnify any Officer or Director, or any former Officer or Director, to the full extent permitted by law.

DIVISION OF COMPLIANT

PAGE TWO OF ARTICLES OR ORGANIZATION OF DEMO TRANSPORT, L.L.C

ARTICLE VIII - ORGANIZATION

The person signing these articles is Adalberto Hernandez whose street address is 8895 SW 147th Ave. #1219, Miami, Florida 33196.

ARTICLE IX - OFFICES

The principal office of the Organization and mailing address shall be established and maintained at 8895 SW 147th Avenue, #1219, Miami, Florida 33196, County of Miami-Dade, State of Florida. The Organization may also have offices at such places within or without the State of Florida as the board may from time to time establish.

ARTICLES X – AMENDMENT

This Organization reserves the right to amend or repeal any provisions contained in these Articles, in accordance with the provisions of the Florida General Organization Act.

PAGE THREE OF ARTICLES ORGANIZATION OR DEMO TRANSPORT, L.L.C.

IN WITNESS WHEROF, the undersigned has executed these Articles of Organization, this 16 day of July, 2008.

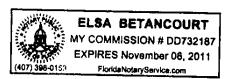
dalberto dernandez

STATE OF FLORIDA)

COUNTY OF MIAMI-DADE) ss.

BEFORE ME, a Notary Public authorized in the State and County set forth above, personally appeared <u>Adalberto Hernandez</u> known to me and known by me to be the person(s), who, as incorporator(s), executed the foregoing Articles of Organization of DEMO TRANSPORT, L.L.C.. and acknowledged before me that he executed those Articles of Organization.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal, in the State and County aforesaid, this ______ day of July, 2008.



NOTAN PUBLIC, State of Florida Printed Name of Notary Public My Commission Expires:

REGISTERED AGENT ACKNOWLEDGEMENT

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED ORGANIZATION 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.

REGISTERED AGENT

By: ___

Adalberto Hernandez