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Resubmi

# ORIDA/FOREIGN LIMITED LIABILITY CO. B+B Truckers LLC B&BTrucklog CO.LLC

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C. LEWIS

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March 13, 2009

FLORIDA DEPARTMENT OF STATE DIVISION of Corporations

HUBCO

SUBJECT: B & B TRUCKING CO. LLC

REF: W09000011869

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

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Carolyn Lewis
Ragulatory Specialist II
Registration/Qualification Section

FAX Aud. #: H09000056206 Letter Number: 509A00008639

P.O BOX 6327 - Tallahassee, Florida 32314

## ARTICLES OF ORGANIZATION FOR

H09009056206

### FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name

The name of the Limited Liability Company is: B & B Truckers LLC

ARTICLE II - Address

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

Principal Office Address:	<u>Mailing</u>	Address:	
15312 Langdale Drive	15312 L	angdale Drive	
Hudson, FL 34669	Hudson	FL 34669	
ARTICLE III - Registered Ag The name and Florida street address of		istered Agent's Signature	2009 MAR 13 AH 8 SECRETARY UT SI
	15312 Langdale Drive		1.00 1.00 6.
	(P.O. Box or Mail Drop Bo	x NOT Acceptable)	ONIDA DATE B: 10
	Hudson, FL 34669		

(City / State / 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 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 Agend's Signature - Bernard W. Sposito

•	•	
ARTICLE IV - Manager(s) of The name and address of each Mar	or Managing Mcmber(s): nager or Managing Member is as follows:	H09000056296
<u>Title;</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:	
MGRM	Bernard W. Sposito - 15312 Langdale Drive	, Hudson, FL 34669
(Use attachment if necessary)		
REQUIRED SIGNATURE:	Aufan	
Signatur	e of a member or authorized representative of a n	nember.
document c	ince with section 608.408(3), Florida Statutes, the onstitutes an affirmation under the penalties of pe in are true.)	

Bernard W. Sposito

Typed or printed name of signee

STAR 13 AM 8: 10