

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6393

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number : 072450003255

Phone : (305) 634-3694 Fax Number : (305)633-9696

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Emmil Address:

### FLORIDA/FOREIGN LIMITED LIABILITY CO.

#### sacm transport, ile

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12/11/2009

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### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### ARTICLE I Name

The name of the Limited Liability Company is:

SACM Transport, LLC

## ARTICLE II Address

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

7120 SW 83 Place Miami, Florida 33143

# ARTICLE III Registered Agent, Registered Office & Registered Agent's Signature

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

Bruce Lamchick 9200 S. Dadeland Blvd., Suite 518 Miami, Florida 33156

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..

Bruce Lamchick

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ARTICLE IV
Members/Managers

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Listed below are the initial members/managers of the limited Liability Company and their respective percentages of ownership

Scot Corwin

100%

# ARTICLE V 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.

Signature of a member

In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under penalty of perjury that the facts stated herein are true

Scot Corwin
Typed or printed name of signee



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