Florida Department of State Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

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Fax Number : (305)220-1440

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. ** S

Email Address:

FLORIDA/FOREIGN LIMITED LIABILITY CO. PIMOSA AUTO TRANSPORT LLC

Certificate of Status0Certified Copy1Page Count03Estimated Charge\$155.00

M. THOMAS

Electronic Filing Menu

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Corporate Filing Menu

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EXAMINER

H09000259175

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:			
The name of the Limited Liability Company is	s:		
Pimosa auto - (Must end with the words "Limited Lish	transport LLC bility Company, "L.L.C.," or "LLC.")		
RTICLE II - Address: he mailing address and street address of the principal office of the Limited Liability Company is:			
Principal Office Address:	Mailing Address:		
171865W 145 ave Man: + 33177	same		
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registration entity with an active Florida registration.) The name and the Florida street address of the Casa Property Name	e registered agent are:		
Nam	FLORID, STATE OR 3		
171865W 145			
	ddress (P.O. Box NOT acceptable)		
City, State	<u>FT、331ラ子</u> , and Zip		
Having been named as registered agent and to liability company at the place designated in registered agent and agree to act in this capac statutes relating to the proper and complete p	a accept service of process for the above stated limited this certificate, I hereby accept the appointment as eity. I further agree to comply with the provisions of all performance of my duties, and I am familiar with and gistered agent as provided for in Chapter 608, F.S		

(CONTINUED)
Page 1 of 2

Registered Agent's Signature (REQUIRED)

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ARTICLE IV- Manager(s) or Managing Member(s):

Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM = Wantaging Member	CESAR Pineda BIRDSW 145 ave
MERM	MIGNIT, F(33 177
1000 0171	MONTH OSTE
<u></u>	Aco C
	SEGNETARY LLAHASSEE
•	EC. A
(Use attachment if necessary)	IAIE ORID,
CEV: Effective date, if other than the ffective date is listed, the date must be days after the date of filing.)	e date of filing: (OPTIONAL) se specific and cannot be more than five business days p

REQUIRED SIGNATURE:

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.)

Francisco A. Dingola

Typed or printed name of signee

Filing Feer:

\$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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