

L10000025513

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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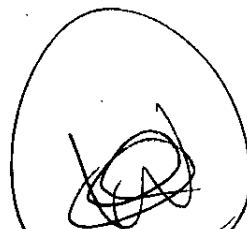


900163767599

02/18/10--01030--004 **100.00

03/05/10--01043--008 **25.00

FILED
10 MAR -5 AM 11:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA





FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 19, 2010

ELIO RUBEN DOTTO
30735 SWAN RD
SORRENTO, FL 32776

SUBJECT: DOTTOGO TRANSPORT, LLC
Ref. Number: L06000059612

We have received your document for DOTTOGO TRANSPORT, LLC and your check(s) totaling \$100.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Articles of Revocation of Dissolution can only be filed within 120 days of the effective date of the Articles of Dissolution. Our records reflect the Articles of Dissolution became effective on and our office received the Articles of Revocation of Dissolution on April 8, 2009. Therefore, the enclosed document cannot be filed and is being returned to you.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6955.

Suzanne Hawkes
Regulatory Specialist II

Letter Number: 010A00004202

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: DottoGo Transport, LLC
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Articles of Revocation of Dissolution and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Elio Ruben Dotto

Name of Person

DottoGo Transport, LLC

Firm/Company

30735 Swan Rd.

Address

Sorrento, FL 32776

City/State and Zip Code

dgtrans@comcast.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Elio Ruben Dotto

Name of Person

at (407)

421-3686

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:



\$100 Filing Fee



\$105 Filing Fee &
Certificate of Status



\$130 Filing Fee &
Certified Copy



\$135 Filing Fee,
Certificate of Status &
Certified Copy

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

DottoGo Transport, LLC

(Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

30735 Swan Rd
Sorrento FL 32776

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

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Elio Ruben Dotto
Name

30735 Swan Rd

Florida street address (P.O. Box **NOT** acceptable)

Sorrento FL 32776
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 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's Signature (REQUIRED)

(CONTINUED)

FILED
10 MAY -5 AM 11:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGR

Elio Ruben Dotto
30735 Swan Rd
Sarasota, FL 32776

FILED
10 MAR -5 AM 11:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

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.)

Elio R. Dotto

Typed or printed name of signee

Filing Fees:

**\$125.00 Filing Fee for Articles of Organization and Designation
of Registered Agent**

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)