# 10000093441

· (Re	equestor's Name)	
(Ac	ldress)	
(Ac	dress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Ві	isiness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



800184973318

09/03/10--01025--014 \*\*160.00

T. CLINE

SEP - 7 2010

EXAMINER

# **COVER LETTER**

Registration Section

Division of Co	orporations				
SUBJECT: New Ta	ngo Logistics LLC				
SUBJECT: NOW 12		ed Liability Comp	any		
	f Organization and fee(s) are				
Please return all corresp	ondence concerning this matt	er to the following	<u>;</u> ;		
Jeffrey Martin	1				
		Name of Person			
New Tango L	ogistics LLC				
		Firm/Company			
10702 Pelica	n Drive			<b>3</b>	26
		Address		110	NEP SEP
Wellington, F	L 33414			五五	- P
	Cit	y/State and Zip Cod	e	RY SEE	\frac{1}{\omega} \big ^{\biggs_1}
martinfarms2	010@hotmail.com E-mail address: (to be used f	for future annual ren	ort notification)	- FG	<u> </u>
For further information	concerning this matter, please		or normalion,	ORIDA	PH 1: 03
Jeffrey Martin		at ( 443	974-3212		
Name	of Person		e & Daytime Telep	hone Number	
Enclosed is a check for	or the following amount:	_			
□\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	Certified Co (additional cop	ру	\$160.00 Filing Fe Certificate of Stat Certified Copy (additional copy is en	us &
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registrat Division Clifton F 2661 Ex	ourier Address ion Section of Corporations Building ecutive Center Ci see, FL 32301	ircle	

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

New Tango Logistics LLC			
(Must end with the words "Limi	ted Liability Company, "L.L.C.," or "LLC.")		
ARTICLE II - Address:			
The mailing address and street address of	of the principal office of the Limited Liabil	lity Company is:	
Principal Office Address:	Mailing Address:		
10702 Pelican Drive			
Wellington, FL 33414			
		20 NO.	١.
	gistered Office, & Registered Agent's Signan Registered Agent. You must designate an individual of the registered agent are:	Sinature 3 Ph	-
(The Limited Liability Company cannot serve as its o business entity with an active Florida registration.)	wn Registered Agent. You must designate an individual	Sinature 3 Ph	The second secon
(The Limited Liability Company cannot serve as its o business entity with an active Florida registration.)  The name and the Florida street address	wn Registered Agent. You must designate an individual	Sinature 3 PH	
(The Limited Liability Company cannot serve as its o business entity with an active Florida registration.)  The name and the Florida street address	wn Registered Agent. You must designate an individual of the registered agent are:  Name	Sinature 3 Ph	and the same of th
(The Limited Liability Company cannot serve as its o business entity with an active Florida registration.)  The name and the Florida street address  Marvin I. Moss  20801 Biscayne Bl	wn Registered Agent. You must designate an individual of the registered agent are:  Name	Sinature 3 Ph	and the same of th
(The Limited Liability Company cannot serve as its o business entity with an active Florida registration.)  The name and the Florida street address  Marvin I. Moss  20801 Biscayne Bl	wn Registered Agent. You must designate an individual of the registered agent are:  Name  vd., Ste. 506	Sinature 3 Ph	The same of the sa

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)
Page 1 of 2

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

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

"MGR" = Manager "MGRM" = Managing Member		
MGRM	Jeffrey Martin	
	10702 Pelican Drive	
·	Wellington, FL 33414	
MGR	Tara Rena Stegen	
	10702 Pelican Drive	
	Wellington, FL 33414	
	TALLAH	ZOMO SEP
(Use attachment if necessary)	SSEE	-3 PH
TICLE V: Effective date, if other than the an effective date is listed, the date must be 90 days after the date of filing.)	e date of filing: (	HONAL) ness days prio
REQUIRED SIGNATURE:	<i>‡</i>	

ture 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.)

Jeffrey Martin

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)