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J. SAULSBERRY EXAMINER

OCT 25 2010

### **COVER LETTER**

TO:		ion Section of Corporations		
SUBJI	<b>የ</b> ሮፕ·	Next Generation	Trucking, L.L.C.	
30101	LC1		Liability Company	
The en	closed Artic	eles of Organization and fee(s) are su	bmitted for filing.	
Please	return all co	orrespondence concerning this matter	to the following:	
		Alicia	Machado	
		<i>y</i>	ame of Person	
		Next Generati	on Trucking, L.L.C.	
		F	irm/Company	
		1708 Diploi	nat Parkway West	
			Address	2
Cape Coral, Fl		Cape Co	oral, FL 33993	SECRETARY OF STATE
	, , , , , , , , ,		State and Zip Code	. <del></del>
•			Dlutions@gmail.com future annual report notification)	× ``
r	a	•	- ·	AH AH
For rur	mer informa	ation concerning this matter, please c	эш: ————————————————————————————————————	
	Alie	cia Machado	at ( 239 ) 634-4524	;™ <b>ठ</b>
	ħ	Name of Person	Area Code & Daytime Telephone Number	
Enclos	sed is a che	ck for the following amount:		
		\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & \$160.00 Filing Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is	tatus &
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle	

Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company	v is:		
Next Generation	n Trucking, L.L.C.		
(Must end with the words "Limited I	Liability Company, "L.L.C.," or "LLC.")		
ARTICLE II - Address: The mailing address and street address of the	ne principal office of the Limited Liability Company is:		
Principal Office Address:	Mailing Address:		
1708 Diplomat Parkway West Cape Coral, FL 33993	1708 Diplomat Parkway West Cape Coral, FL 33993		
Cape Colai, FL 33993	Supo Coldi, i E Cocco		
business entity with an active Florida registration.)  The name and the Florida street address of t  Camilo C. Co  N  1708 Diploma	ontreras Alvarez  AHASSER  AT Parkway West		
Cape Coral,	FL 33993 y, State, and Zip		
Having been named as registered agent and liability company at the place designated registered agent and agree to act in this cap statutes relating to the proper and complet accept the obligations of my position as the complete accept the obligations of my position as the complete accept the obligations of my position as the complete accept the obligations of my position as the complete accept the obligations of my position as the complete accept the obligations of my position as the complete accept the complete accept the obligations of my position as the complete accept the obligations of my position as the complete accept the obligations of my position accept the complete accept the obligations of my position accept the complete accept the obligations of my position accept the complete accept the obligations of my position accept the complete accept the obligations of my position accept the complete accept the obligations of my position accept the complete accept the obligations of my position accept the obligations of my position accept the complete accept the obligations of my position accept the obligations of my position accept the complete accept the obligations of my position accept the obligations of my position accept the complete acce	d to accept service of process for the above stated limited in this certificate, I hereby accept the appointment as acity. I further agree to comply with the provisions of all the performance of my duties, and I am familiar with and registered agent as provided for in Chapter 608, F.S		

(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: Title: Name and Address: "MGR" = Manager "MGRM" = Managing Member MGR Alicia Machado 1708 Diplomat Parkway West Cape Coral, FL 33993 (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.)

(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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Signature of a member or an authorized representative of a member.

Camilo C. Contreras Alvarez

Typed or printed name of signee

#### Filing Fees:

**REQUIRED SIGNATURE:** 

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)