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SECRETARY OF STATE

FIED

# **COVER LETTER**

' TO: ' Registration Section Division of Corporations

SUBJECT: BORIQUAS' TRUCKING ENTERPRISE, LLC  Name of Limited Liability Company
Name of Limited Liability Company
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
JACKIE ROJAS-QUINONES
Name of Person
ACCOUNTING & BEYOND, LLC
Firm/Company
3906 N. ARMENIA AVE.
Address
TAMPA, FL 33607
City/State and Zip Code
ACCOUNTINGANDBEYOND@GMAIL.COM  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
JACKIE ROJAS-QUINONES at ( 813 ) 998-9800
Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$\forall \text{\$125.00 Filing Fee} \text{ \$\text{\$130.00 Filing Fee & Certificate of Status}} \text{ \$\text{\$\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)}} \text{ \$\text{\$\$Certified Copy (additional copy is enclosed)}} \text{ \$\text{\$\$}\$
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

# Boriquas' Trucking Enterprise, LLC 1809 Coyote Pl Brandon, FL 33511

RE: Boriquas' Trucking Enterprise, Inc.

Document #: P06000026749

April 11, 2010

To Whom It May Concern:

This letter is to notify the Florida Department of State of our intentions of not re-instating the aforementioned corporation (Boriquas' Trucking Enterprise, Inc.)

It is our intention to continue on with the new filing of the LLC of same/like name. We would also like the money which was applied to the conversion of aforementioned name to be applied to the filing of this new LLC. Attached please find our Articles of Organization as requested.

Please feel free to contact me, should you have any further questions, comments or concerns.

Sincerely.

Jose Inostroza

JI/jrq enclosure

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### **ARTICLE I - Name:**

The name of the Limited Liability Company is:

# BORIQUAS' TRUCKING ENTERPRISE, 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:
1809 COYOTE PLACE	1809 COYOTE PLACE
BRANDON, FL 33511	BRANDON, FL 33511

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:

JOSE INOSTF	ROZA
	Name
1809 COY	OTE PLACE
Flori	da street address (P.O. Box NOT acceptable)
BRANDON	<sub>FL</sub> 33511
	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 Agont's Signature (REQUIRED)

(CONTINUED)

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11 APR 18 PH 5: 19

SECRETARY OF STATE
TABLE AHASSEE, 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	Name and Address:
"MGRM" = Managing Memb	per
MGRM	JOSE INOSTROZA
	1809 COYOTE PLACE
	BRANDON, FL 33511
(Use attachment if necessary)	ı
LE V: Effective date if other	than the date of filing: (OPTION
ffective date is listed, the date	must be specific and cannot be more than five business da
days after the date of filing.)	
<u>REQUIRED</u> 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. 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.)

# JOSE INOSTROZA

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)