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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. BRYAN

JUN 20 2012

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: LTL Logistics Management, LLC
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:

Ruth Gray

Name of Person

Wade Wilson, CPA, PA

Firm/Company

1517 W. Garden Street

Address

Pensacola, FL 32502

City/State and Zip Code

transportfinanc001@yahoo.com

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

For further information concerning this matter, please call:

Ruth Gray

Name of Person

at (850) 438-1122

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &
Certificate of Status

☐ \$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☒ \$160.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

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

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TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I – Name:

The name of the Limited Liability Company is:

LTL LOGISTICS MANAGEMENT, LLC

ARTICLE II – Address:

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

Principal Office Address:

1517 W. Garden Street
Pensacola, FL 32502

Mailing Address:

1517 W. Garden Street
Pensacola, FL 32502

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

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

Thomas Guthrie

Name

1517 W. Garden Street
Florida Street Address

Pensacola, FL 32502
City, State, and Zip Code

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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

(CONTINUED)

ARTICLE IV – Managing Member(s) or Member(s):

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

Title:

“MGRM” = Managing Member

“MBR” = Member

Name and Address:

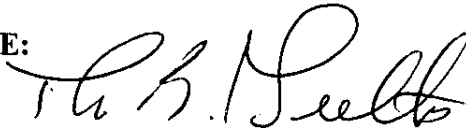
MGRM

Thomas Guthrie
1517 W. Garden St.
Pensacola, FL 32502

MBR

Marold Studesville
11041 MacMurray St.
Garden Grove, CA 92841

REQUIRED SIGNATURE:



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

Thomas Guthrie
Name of Signee

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TALLAHASSEE, FLORIDA