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## **COVER LETTER**

TO:

**Registration Section** 

Division of Corporations
SUBJECT: PHOENIX LOGISTICS & CONSULTING 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:
DEISE BORGHETTI  Name of Person
PHOENIX LOGISTICS & CONSULTING, LLC.
1730 SOUTH FEDERAL HWY #282 Address /
CONTEXPHORENTY OF GNAIL COM
COMEXPHOENIX @ GMAIL . COM  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
DEISE BORGHETTI at ( 20) 722 - 9283  Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\ \text{Certificate of Status}\$\$ 130.00 Filing Fee & \text{Certified Copy} & \text
Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallabassee, FL 323142661 Executive Center Circle

Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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

## **ARTICLE II - Address:**

**Principal Office Address:** 

**ARTICLE I - Name:** 

The name of the Limited Liability Company is:

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

**Mailing Address:** 

1730 S. FEDERAL HWY	1730 S. FEDERAL HWY
SUITE 282	SUITE 282
DELRAY BEACH FL 33483	DELRAY BEACH FL 33483
r	1 -

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:	<b>五</b> 紹	る	
DEISE RORGHETTI	CINE	<u>J</u>	77
1730 SOUTH FEDERAL HWY #282	SSEE,	77 P	LEC
Florida street address (P.O. Box NOT acceptable)	FLO	بن	
DELRAY BEACH FL 33483  City, State, and Zip	AIE	<u></u>	

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

Title: "MGR" = Manager	Name and Address:
"MGRM" = Managing Mem	ber
MGRM	DEISE BORGHETTI
•	DEISE BORGHETTI 1730 S. FEDERAL HWY. #28 DELRAY BEACH FL 33483
,	DELKAY SEACH FL 35487
<del></del>	
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•	
LE V: Effective date, if other fective date is listed, the date days after the date of filing.  REQUIRED SIGNATURE	than the date of filing: (OPTIONAL than the date of filing: (OPTIONAL than the date of filing: (OPTIONAL than the date of filing:
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LE V: Effective date, if other fective date is listed, the date days after the date of filing.  REQUIRED SIGNATURE  Signature of (In accordance with seconstitutes an affirmation I am aware that any ficonstitutes a third deconstitutes a third deconstitutes a third deconstitutes a third deconstitutes as the constitutes as the constitutes a string deconstitutes as the constitutes as the consti	than the date of filing:  e must be specific and cannot be more than five business day  a member or an authorized representative of a member.  ection 608.408(3), Florida Statutes, the execution of this document ation under the penalties of perjury that the facts stated herein are true. The state information submitted in a document to the Department of State

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

of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)