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D. BRUCE

AUG 21 2012

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: U S I Logistics, 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:

Eddie Laster

Name of Person

Firm/Company

139 Highlands Ave

Address

Auburndale, FL 33823

City/State and Zip Code

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

For further information concerning this matter, please call:

Eddie Laster

Name of Person

at (863) 581-3419

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I – Name:

The name of the Limited Liability Company is U & I Logistics, LLC.

ARTICLE II – Address:

The mailing address and street address of the principal office of the Limited Liability Company is 139 Highlands Ave, Auburndale, FL 33823.

ARTICLE III – Registered Agent, Registered Office, & Registered Agents Signature:

The name and the Florida street address of the registered agent are Eddie Laster, 139 Highlands Ave, Auburndale FL, 33823.

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..



Eddie Laster

ARTICLES IV – Manager(s) or Managing Member(s):

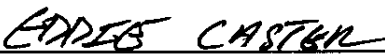
The name and address of each Manager or Managing Member is as follows:

MGRM	Eddie Laster	139 Highlands Ave, Auburndale, FL 33823
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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.817.55, F.S)

_____

Printed name signee