

#12000/53319

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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Division of Corporations  
Fax Number : (850) 617-6383

From:

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Email Address: \_\_\_\_\_

**FLORIDA LIMITED LIABILITY CO.**

**US FREIGHT ~~LLC~~ CARRIER LLC**

Certificate of Status	1
Certified Copy	0
Page Count	03
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K. SALY  
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#1250 P.002/004



December 5, 2012

FLORIDA DEPARTMENT OF STATE

LAZARUS CORPORATE FILING SERVICE, INC.  
Division of Corporations

SUBJECT: US FREIGHT LLC  
REF: W12000060480

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

The document number of the name conflict is L12000151889 "US FREIGHT LLC".

If you have any questions concerning the filing of your document, please call (850) 245-6870.

Karen A. Salas  
Regulatory Specialist II

FAX Aud. #: H12000284123  
Letter Number: 612A00028843

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12 DEC -7 PM 12:46

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

P.O BOX 6327 - Tallahassee, Florida 32314

H12000204123

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY****ARTICLE I - Name:**

The name of the Limited Liability Company is:

US FREIGHT CARRIER 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:**239 N University Drive  
Suite # E  
Pembroke Pines, FL 33024**Mailing Address:**SAME**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:

ROUSLYN DIAZ

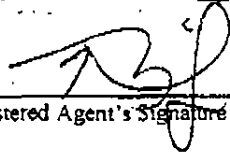
Name

239 N University Dr. Suite # EFlorida street address (P.O. Box **NOT** acceptable)Pembroke Pines FL 33024

City, State, and Zip

FILED  
12 DEC -7 AM 9:33  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*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)

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

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

**Title:**

"MGR" = Manager

"MGRM" = Managing Member

MGRM**Name and Address:**

ROUSLYN DIAZ  
239 N UNIVERSITY DR Suite #E  
Pembroke Pines FL 33024

(Use attachment if necessary)

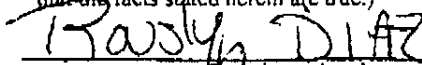
**ARTICLE V:** Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)

(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.)

**REQUIRED 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.)



Typed or printed name of signer

**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)

H12000284123