## 1300051867

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		
·		

Office Use Only



600246439536

Effective Date 04/01/13

04/08/13--0104?--032 \*\*160.00

FILED
2013 APR -8 PM 2: 38
SECRETARY OF STATE
AND ANASSEE, FLORID

APR -9 2013 J. BRYAM

## **COVER LETTER**

TO:

**Registration Section** 

Division of Corporations
SUBJECT: SELAH TRUCKING 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:
ROMAR BAKER Name of Person
SELAH TRUCKING LLC Firm/Company  2714 W SITKA ST  Address
2714 W SITKA ST SST & THE P
Address
TAMPE FL 33614  City/State and Zip Code
SELAH, TOA & G. Moj Com  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
RONALD BAKER at (813) 363-5385  Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\ \text{S130.00 Filing Fee & Certificate of Status} \text{Certified Copy (additional copy is enclosed)} \ \text{Certified Copy (additional copy is enclosed)}
Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	12 TO
The name of the Limited Liability Company is:	に発えて
SELAH TRUCKING (Must end with the words "Limited Liability	LLC SST B
(Must end with the words "Limited Liabilit	y Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	38
The mailing address and street address of the prin	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
2714 W STTKA ST	2714 W SZTKA ST
2714 W SITKA ST Tampa FLOQ. LA 33614	TAM/A FC 37614
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registe business entity with an active Florida registration.)	
The name and the Florida street address of the re	
RUNALD BAKE	-
Name	
2714 W STTICA Florida street addr	57
Tampa City, Stat	FL 33610
City, Stat	e, and Zip
liability company at the place designated in the registered agent and agree to act in this capacity, statutes relating to the proper and complete per	ccept service of process for the above stated limited is certificate, I hereby accept the appointment as  I further agree to comply with the provisions of all formance of my duties, and I am familiar with and tered agent as provided for in Chapter 608, F.S

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

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

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

Name and Address:
Bull Boke
2714 W SITKA ST
1 Aapa, FL 33614
GAIL BAKER PROPERTY
7AMPA, FC 33614 300
41/. 100.0
the date of filing: 4/1/2013 (OPTIONAL) the specific and cannot be more than five business days prior
. De succinc and cailing he more mail nye dissiless days of Rif

**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. 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.)

**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)