13000073630

(Requestor's Name) (Address) (Address)	000247538320
(City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name)	05/21/1301001D18 **125.00
Certified Copies Certificates of Status Special Instructions to Filing Officer: OK PER G.H.	13 MAY 20 PH S
Office Use Only	FECTIVE DATE 5 10 2013 INAY 20 PM

MAY 3 0 2019

B. KOHR

To Whom It May Concern,

Effective immediately, I will not be renewing On the Way Logistics Transport LLC under Dock
L12000020382.

COVER LETTER

TO:

Registration Section

Division of Corporations

-Coate ON THE WAY LOGISTICS TRANSPORT L

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:

JORGE F BARRIOS

Name of Person

ON THE WAY LOGISTICS TRANSPORT LLC

Firm/Company

19672 NW 59 PL

Address

MIAMI, FL 33015

City/State and Zip Code

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

For further information concerning this matter, please call:

JORGE F BARRIOS

Name of Person

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

SHOW WITH

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name	AR'	TICI	JE I	- Na	me
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The name of the Limited Liability Company is:

ON THE WAY LOGISTICS TRANSPORT 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 Con

RIOS
PL.
115

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:

JORGE F BA	RRIOS
	Name
19672 NW 59	PL
	Florida street address (P.O. Box NOT acceptable)
MIAMI,	_{FL} 33015
	City, State, and Zip

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..

egistered 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:

Title:	Name and Address:
"MGR" = Manager "MGRM" = Managing Memb	er
MGR	BARRIOS, JORGE F
	19672 NW 59 PL
	MIAMI, FL 33015
(Use attachment if necessary)	
(Ose attachment if necessary)	
	than the date of filing $\frac{5/13/2013}{}$. (OPTION
CC-41 Jake in Haded 44- 3-	te must be specific and cannot be more than five busin
·	Mine \
or 90 days after the date of t	filing.)
or 90 days after the date of i	
or 90 days after the date of i	
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or 90 days after the date of t	
or 90 days after the date of the REQUIRED SIGNATURE:	a member or an authorized representative of a member.
or 90 days after the date of the REQUIRED SIGNATURE: Signature of the Control of	

BARRIOS, JORGE F

Typed or printed name of signee

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)