# L13000675428

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer.	
		·

Office Use Only



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05/22/13--01012--025 \*\*160.00

Effective Date 5/20/3

MAY 2 3 2013

T. HAMPTON

(850) 245-6051.

### **COVER LETTER**

TO: Registration Section

**Division of Corporations** 

SUBJECT: Black Stallion Express, 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:

### Natasha M. Castaneda

Name of Person

Black Stallion Express, LLC

Firm/Company

14650 Bull Run Rd, Suite 225

Address

Miami Lakes, FL 33014

City/State and Zip Code

natashamcastaneda@gmail.com

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

For further information concerning this matter, please call:

Natasha M. Castaneda

at (305

218-3269

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

# Effective Date 5/20/13

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	(Must end with the words "Limite	d Liability Company, "L.L.C.," or "LLC.")
ARTICLE II -	Address:	
The mailing add	lress and street address of	the principal office of the Limited Liability Company is:
Principal Office Address:		Mailing Address:
	<b>-</b>	14650 Bull Run Rd, Suite 225
14650 Bull Run Rd	, Suite 225	
Miami Lakes, FL 33  ARTICLE III (The Limited Liability	- Registered Agent, Registered serve as its own	Miami Lakes, FL 33014  stered Office, & Registered Agent's Signature: n Registered Agent. You must designate an individual or another
ARTICLE III (The Limited Liability business entity with	014 - Registered Agent, Regi	stered Office, & Registered Agent's Signature:  n Registered Agent. You must designate an individual or another
ARTICLE III (The Limited Liability business entity with	- Registered Agent, Registry Company cannot serve as its own an active Florida registration.)	stered Office, & Registered Agent's Signature:  n Registered Agent. You must designate an individual or another  f the registered agent are:
ARTICLE III (The Limited Liability business entity with	- Registered Agent, Registry Company cannot serve as its own an active Florida registration.) he Florida street address o	stered Office, & Registered Agent's Signature:  n Registered Agent. You must designate an individual or another
ARTICLE III (The Limited Liability business entity with	- Registered Agent, Registry Company cannot serve as its own an active Florida registration.) he Florida street address o	stered Office, & Registered Agent's Signature:  n Registered Agent. You must designate an individual or another  f the registered agent are:
ARTICLE III (The Limited Liability business entity with	- Registered Agent, Registry Company cannot serve as its own an active Florida registration.)  he Florida street address o  Natasha M. Castaneda  14650 Bull Run Rd, Suite 2	stered Office, & Registered Agent's Signature:  n Registered Agent. You must designate an individual or another  f the registered agent are:
ARTICLE III (The Limited Liability business entity with	- Registered Agent, Registry Company cannot serve as its own an active Florida registration.)  he Florida street address o  Natasha M. Castaneda  14650 Bull Run Rd, Suite 2	stered Office, & Registered Agent's Signature:  n Registered Agent. You must designate an individual or another  f the registered agent are:  Name  25  reet address (P.O. Box NOT acceptable)

Registered Agent's Signature (REQUIRED)

and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..

(CONTINUED)

Page 1 of 2

SECRETARY OF STATE DIVISION OF CORPORATIONS

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

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

<u>Title:</u> "MGR" = Manager	Name and Address:
"MGRM" = Managing Member	
MGRM	Natasha M. Castaneda
	14650 Buil Run Rd, Suite 225
	Miami Lakes, FL 33014
MGR	Mario E. Garcia
<del></del>	14650 Bull Run Rd, Suite 225
	Miami Lakes, FL 33014
	1
X.	
(Use attachment if necessary)	
ICIEV. Effective data if other th	nan the date of filing: May 20, 2013
	e must be specific and cannot be more than five business de
to or 90 days after the date of fili	
to or 90 days after the date of fin	mg. <i>)</i>
DECUMENCION TUDE	
<u>REQUIRED</u> SIGNATURE:	
	N-Q-Q. J
Signature of a )	member or an authorized representative of a member.

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.)

Natasha M. Castaneda

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)