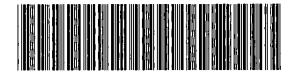
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(Re	questor's Name)	
(Ad	dress)	
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	WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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SEP 1 8 2014

T. HAMPTON

COVER LETTER

TO:	Registration	n Section Corporations		
SUBJI	ECT: <u>B&G</u>	Express LLC	BE & G EX	press LLC
The en	closed Articles	s of Organization and fee(s) a	are submitted for filing.	
Please	return all corre	spondence concerning this n	natter to the following:	
	Brent Gr	iffin	Name of Person	
	_		Name of Person	
	D& 0 E	: xpress LLC	BE&G EXPR	ess LLC
	15908 N	W CR 379A	Address	
	<u>Bristol. F</u>	L. 32321	City/State and Zip Code	
		,	Dity/State and Zip Code	
<u>br</u>	entgriffin&ym	ail.com	16 64 4	<u> </u>
		E-mail address: (to be use	ed for future annual report notifica	uonj
For fur	ther informatio	on concerning this matter, ple	ase call:	
Brent	Griffin	at (850) 544-0160	
		ne of Person		lephone Number
			·	
Enclos	ed is a check fo	or the following amount:		
_		_	D 4165 00 BH B 0	Date of the Park
	00 Filing Fee	✓\$130.00 Filing Fee & Certificate of Status	☐\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)
	<u>M</u> a	iling Address	Street/Courier Add	ress
	Reg	nstration Section	Registration Section	
		rision of Corporations	Division of Corporat	ions
). Box 6327 lahassee, FL 32314	Clifton Building 2661 Executive Cent	er Circle
	1 41.	шшээсс, Г. С. J.£J.14	ZOOT EXCCUTIVE CEIN	CI CIICIC

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

E.		
B & G Express LLC		
(Mı	ast end with the words '	'Limited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address		
The mailing address and	street address of the pri	ncipal office of the Limited Liability Company is:
Principal Office Addres	IS :	Mailing Address:
15908 NW Cr 379A		15908 NW CR 379A
	ompany cannot serve as	Office, & Registered Agent's Signature: its own Registered Agent. You must designate an individual
ARTICLE III - Registe (The Limited Liability Canother business entity v	ompany cannot serve as with an active Florida re	Office, & Registered Agent's Signature: its own Registered Agent. You must designate an individualistration.)
ARTICLE III - Registe (The Limited Liability Coanother business entity value and the Florida	ompany cannot serve as with an active Florida re a street address of the re	Office, & Registered Agent's Signature: its own Registered Agent. You must designate an individualistration.)
ARTICLE III - Registe (The Limited Liability Coanother business entity value and the Florida	ompany cannot serve as with an active Florida re	Office, & Registered Agent's Signature: its own Registered Agent. You must designate an individualistration.)
ARTICLE III - Registe (The Limited Liability Coanother business entity value of the name and the Florida	ompany cannot serve as with an active Florida re a street address of the re GN Trucking LLC	Bristol. Fl. 32321 Office, & Registered Agent's Signature: a its own Registered Agent. You must designate an individual signification.) registered agent are: Name
ARTICLE III - Registe (The Limited Liability Coanother business entity value of the name and the Florida	ompany cannot serve as with an active Florida re a street address of the re GN Trucking LLC	Bristol. Fl. 32321 Office, & Registered Agent's Signature: sits own Registered Agent. You must designate an individual signification.) egistered agent are: Name
ARTICLE III - Registe (The Limited Liability Coanother business entity was a second to the form of the	ompany cannot serve as with an active Florida re a street address of the re GN Trucking LLC	Bristol. Fl. 32321 Office, & Registered Agent's Signature: a its own Registered Agent. You must designate an individual signification.) registered agent are: Name

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 605, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

14 SEP 18 AA 11: 25

<u>litle:</u>	Name and Address:
AMBR" = Authorized Memb	r
MGR" = Manager	
MGR	Brent Griffin
	15908 NW CR 379A
	Bristol, FL. 32321
 	
-	
	· · · · · · · · · · · · · · · · · · ·
•	the date of filing: (OPTIONAL)
V: Effective date, if other that tive date is listed, the date in filing.)	n the date of filing:
Use attachment if necessary) V: Effective date, if other thative date is listed, the date in filing.) VI: Other provisions, if any. EOUIRED SIGNATURE:	n the date of filing
V: Effective date, if other that tive date is listed, the date in filing.) VI: Other provisions, if any EQUIRED SIGNATURE:	ust be specific and cannot be more than five business days prior to or 90
V: Effective date, if other that tive date is listed, the date in filing.) VI: Other provisions, if any EQUIRED SIGNATURE: Signature (In accordance with	e of a member or an authorized representative of a member.
V: Effective date, if other that tive date is listed, the date in filing.) VI: Other provisions, if any EQUIRED SIGNATURE: Signature (In accordance with constitutes an affirm	e of a member or an authorized representative of a member. ection 605.0203 (1) (b), Florida Statutes, the execution of this document tion under the penalties of perjury that the facts stated herein are true.
V: Effective date, if other that tive date is listed, the date in filing.) VI: Other provisions, if any. EQUIRED SIGNATURE: Signature (In accordance with constitutes an affirm. I am aware that any if	e of a member or an authorized representative of a member. ection 605.0203 (1) (b), Florida Statutes, the execution of this document tion under the penalties of perjury that the facts stated herein are true.
V: Effective date, if other that tive date is listed, the date in filing.) VI: Other provisions, if any. EQUIRED SIGNATURE: Signature (In accordance with constitutes an affirm. I am aware that any if	e of a member or an authorized representative of a member. ection 605.0203 (1) (b), Florida Statutes, the execution of this document tion under the penalties of perjury that the facts stated herein are true.
V: Effective date, if other that tive date is listed, the date in filing.) VI: Other provisions, if any. EQUIRED SIGNATURE: Signature (In accordance with constitutes an affirm. I am aware that any if	e of a member or an authorized representative of a member. ection 605.0203 (1) (b), Florida Statutes, the execution of this document tion under the penalties of perjury that the facts stated herein are true. alse information submitted in a document to the Department of State tree felony as provided for in s.817.155, F.S.)

Page 2 of 2

\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)