

L19000021061

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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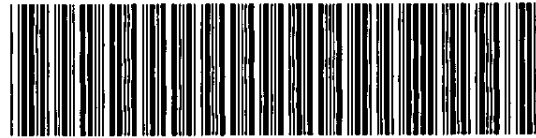
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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15 FEB -4 PM 1:04  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FEB 7 2015

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: R & L Transportation Services of Florida, 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:

Romanzo O. Hill

Name of Person

R & L Transportation Services of Florida, LLC

Firm/Company

9645 Old Bay meadows Rd Unit 930

Address

Jacksonville, FL 32256

City/State and Zip Code

Romanzo@gmail.com

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

For further information concerning this matter, please call:

Romanzo Hill at (229) 329 9423  
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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

L & L Transportation Services of Florida, 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:

9645 Old Bay Meadows Rd  
Unit 930  
Jacksonville, FL 32256

Mailing Address:

130 Shepard's Way  
Thomasville, Ga

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:

Ramon O. Hill  
Name  
9645 Old Bay Meadows Rd  
Florida street address (P.O. Box NOT acceptable)  
Unit 930  
Jacksonville FL 32256  
City 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 605, F.S.

Ramon O. Hill  
Registered Agent's Signature (REQUIRED)

(CONTINUED)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:

"AMBR" = Authorized Member

"MGR" = Manager

*authorized member*

Name and Address:

*Lorenzo O. Hill - Owner  
9645 Old Bay Meadows unit 930  
Jacksonville, FL 32256*

(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.)

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:

*Lorenzo O. Hill*

Signature of a member or an authorized representative of a member.

(In accordance with section 605.0203 (1) (b), 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.)

*Lorenzo O. Hill*

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)

DEPARTMENT OF STATE  
FLORIDA

15 FEB -4 PM 1:04

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AND  
FILED