

L 15000076830

NEIL MOONEY
(Requestor's Name)

1911 Cap Cir NE
(Address)

TLH 32308
(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

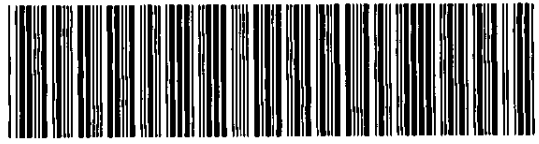
KINGSHIP LINE, LLC
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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DIVISION OF CORPORATIONS

15 MAY -1 PM 3:13
STATE OF FLORIDA
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

K. SALY
EXAMINER
MAY -1 2015

APPROVED
AND
FILED

15 MAY -1 PM 3:13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION OF
Kingship Line, LLC

ARTICLE I:

The name of the limited liability company shall be Kingship Line, LLC.

ARTICLE II:

The mailing address and the street address of the principal office of the limited liability company shall be:

5900 NW 97 Ave., Bldg. #6
Miami, FL 33178, USA

ARTICLE III:

Louis Stinson Jr. PA
110 Merrick Way
Coral Gables, Florida 33134

shall be the limited liability company's registered agent. He is familiar with and accepts the obligations of the position.

ARTICLE IV:

The members of the above stated Limited Liability Company are as follows:

Member

Hexagon Ventures, Inc.
Edificio Magel, Oficina C-1
Avenida Samuel Lewis, Obarrio
Ciudad de Panamá, República de Panamá

And

Member

Joseph Anthony Ciero
5900 NW 97 Ave., Bldg. #6
Miami, FL 33178, USA

And

Managing Member

Marcello Glass
5900 NW 97 Ave., Bldg. #6
Miami, FL 33178, USA

APPROVED
FILED

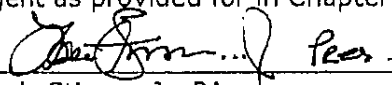
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SECRETARY OF STATE
PALM BEACH COUNTY FLORIDA

ARTICLE V:

This Limited Liability Company is established for and authorized to conduct all business legal in the state and elsewhere. Specifically, it is authorized to act as a Customs Broker once licensed and permitted by the United States. It is further authorized to act as a Freight Forwarder and/or NVOCC, without limitation, once licensed.

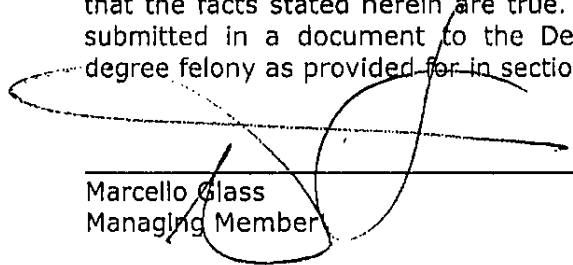
Having been named as registered agent and to accept service of process for the above stated Limited Liability Company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all 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, Florida Statutes.



Louis Stinson Jr. PA
Registered Agent May 1, 2015

REQUIRED SIGNATURE:

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 section 817.155, F.S.)



Marcello Glass
Managing Member
May 1, 2015