

L15000106605

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W15-39972

MD 6/23

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: LERJ'S TRANSPORT "LLC" OF USA INC.
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:

EMMANUEL FRANCOIS

Name of Person

N/A

Firm/Company

Address

10715 N. HARTTS DR. TAMPA, FL. 33617

City/State and Zip Code

Emman2436@yahoo.com

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

For further information concerning this matter, please call:

Emmanuel/Francois at (813) 479-8009

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 Address

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 9, 2015

EMMANUEL FRANCIS
10715 N. HARTTS DRIVE
TAMPA, FL 33617

SUBJECT: LERJ'S TRANSPORT OF USA INC.
Ref. Number: W15000039972

We have received your document for LERJ'S TRANSPORT OF USA INC. and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You have submitted the document and fees to form a Florida limited liability company; however, your name implies you wish to form a corporation. The name of a limited liability company cannot contain a corporate suffix. Corp., Corporation, Company, Co., Incorporated, and Inc. are all corporate suffixes. The name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC."

Please correct the suffix or, if you wish to form a corporation, submit Articles of Incorporation. Any fees previously submitted with your limited liability company filing will be applied to your corporate filing.

You must insert the letters "MGRM" beside the name and address of each managing member and/or the letters "MGR" beside the name and address of each manager listed in the document.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Maryanne Dickey
Regulatory Specialist II
New Filing Section

Letter Number: 815A00012090

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: LERJ'S Transport of USA 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:

Emmanuel Francois
Name of Person

N/A
Firm/Company

10715 N. Harbors Dr.
Address

Tampa, FL 33617
City/State and Zip Code

Eman2436@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Emmanuel/Francois at (813) 479-8609
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 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:

LERJ'S Transport of USA 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:

Mailing Address:

10715 N. Hart's Dr Tampa, FL 33617

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:

Emanuel Francois

Name

10715 N. Hart's Dr

Florida street address (P.O. Box **NOT** acceptable)

Tampa FL 33617

City

State

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..


Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

MGR M

MGR M

Name and Address:

Emmanuel Francois

10715 N. Herthys Dr

Tampa, FL 33617

Rosely Francois

10715 N. Herthys Dr

Tampa FL 33617

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: June 17, 2015 (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.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any.

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 s.817.155, F.S.)

EMMANUEL FRANCOIS

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)