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## **COVER LETTER**

Division of Corporations	
SUBJECT: LA FE TRANSPORTATION	on Services "LLC"
Name of Limited Liability	Company
	<b></b>
The enclosed Articles of Organization and fee(s) are submitted fo	r filing.
Please return all correspondence concerning this matter to the foll	lowing:
YASEPF EDUARDO	Pedroso Iblesias
Name of Pe	erson exposition
Fight/C6mp	pany
5125 E B In	
5125 E 8 In Address	8
Higlerh, PL 33013	
City/State and Z	Zip Code
E-mail address: (to be used for future ann	nual report notification)
For further information concerning this matter, please call:	
Jaseff E. Pedros D at (786)  Name of Person Area Code	443 - 8323  Daytime Telephone Number
Enclosed is a check for the following amount:	
\$125.00 Filing Fee \$130.00 Filing Fee & Certificate of Status Certified	Filing Fee & \$160.00 Filing Fee, Copy Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address St	reet Address
New Filing Section New	ew Filing Section
	ivision of Corporations lifton Building
	661 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:

LA FE'TR	Anspor	lation	Services "LLC"
(Must end with the	words <sup>4</sup> Limited	Liability Company	y, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address o	f the principal of	fice of the Limited	1 Liability Company is:
Principal Offic	e Address:		Mailing Address:
5125 E B L HALLAM, PL 3	<u>n</u> 3013		5125 E BLA Hialenh, PL 33013
ARTICLE III - Registered Agent, Reg (The Limited Liability Company cannot another business entity with an active Fl	serve as its own	Registered Agent.	
The name and the Florida street address	of the registered	agent are:	
	Jase A	E. Peo	1050
<del></del>	Vacci,	Name	<del></del>
	5125 E	BLA	
Flori	da street address	(P.O. Box NOT a	acceptable)
	Haleah	FL	33013
<del></del>	City	State	Zip
place designated in this certificate, I hereb	y accept the appo s of all statutes re s of my position a	nintment as register lating to the prope is registered agent	e above stated limited liability company at the red agent and agree to act in this capacity. It rand complete performance of my duties, and I as provided for in Chapter 605, F.S  Lure (REQUIRED)

Page 1 of 2

"AMBR" = Authorized Member "MGR" = Manager	Jaseff E Pedroso 5125 E B Ju Hinlinh PL 33013  (ARIALY +: Consugra 1125 E BLn Hinlian FL 33013
<u> </u>	5125 & B to Hinlinh KL 33013
	5125 & B to Hinlinh KL 33013
M6R /	Hinlinh KL 33013 (ARIALY +: Consugra 5125 E BLn Hinlian KL 33013
<u>M6R</u>	TARIALY +: Consuegra
	HAVAN EL 33013
	HAGAN FC 33013
ICLE V: Effective date, if other than the date of filing:  1 effective date is listed, the date must be specific and canno ate of filing.)  2: If the date inserted in this block does not meet the applicab	t be more than five business days prior to or 90 days a le statutory filing requirements, this date will not be list
ocument's effective date on the Department of State's record	S.
ICLE VI: Other provisions, if any.	
REOUIRED SIGNATURE:	Λ //.
	1 Leoho SO
Signature of a member or an auti	portized representative of a member.
Signature of a member or an auti This document is executed in accordance	e with section 605.0203 (1) (b), Florida Statutes.
This document is executed in accordance I am aware that any false information sub	with section 605.0203 (1) (b), Florida Statutes. imitted in a document to the Department of State
Signature of a member or an auti This document is executed in accordance I am aware that any false information sub constitutes a third degree felony as provid	e with section 605.0203 (1) (b), Florida Statutes. initted in a document to the Department of State led for in s.817,155, F.S.

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)

ARTICLE IV-

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