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Office Use Only



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## **COVER LETTER**

TO:	Registration Section Division of Corporations		
CUD IE		ILOGIC LLC	
SUBJE		Limited Liabili	ty Company
The enc	losed Articles of Organization and fee(s)	are submitted	for filing.
Please r	eturn all correspondence concerning this	matter to the fe	ollowing:
	Julia Greenberg-Aguilar		
		Name of	Person
	MyUSACorporation.com		
		Firm/Co	npany
	1 Radisson Plaza, Suite 800	•	
		Addre	ess
	New Rochelle, NY 10801		
	universallogistick@gmail.com	City/State and	l Zip Code
	E-mail address: (to be us	sed for future a	nnual report notification)
For furthe	er information concerning this matter, ple	ease call:	
	Julia Greenberg-Aguilar	877	330-2677
	Name of Person	Area Code	Daytime Telephone Number
Enclose	d is a check for the following amount:		
<b>₽</b> \$125.00	Filing Fee \$130.00 Filing Fee & Certificate of Status	Certific	0 Filing Fee & S160.00 Filing Fee, ed Copy 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 Tallahassec, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY.

(Must en	nd with the words "Limited Liability	
RTICLE II - Address:		y Company, "L.L.C.," or "LLC.")
he mailing address and stree	et address of the principal office of the	the Limited Liability Company is:
Princ	cipal Office Address:	Mailing Address:
180	77 Worrington St	1807 Worrington St
Sar	rasota, Fl 34231	Sarasóta, Fl 34231
e Limited Liability Compather business entity with a	an active Florida registration.)	red Agent. You must designate an individual or
he Limited Liability Compa other business entity with a	any cannot serve as its own Register an active Florida registration.)  eet address of the registered agent ar  Michailo Sorox	red Agent. You must designate an individual or
The Limited Liability Companion business entity with a	any cannot serve as its own Register an active Florida registration.)  eet address of the registered agent ar  Michailo Sorox Name	red Agent. You must designate an individual or re:
The Limited Liability Companion of the business entity with a	any cannot serve as its own Register an active Florida registration.)  eet address of the registered agent ar  Michailo Sorox	red Agent. You must designate an individual or re:  chev  on St
The Limited Liability Companion business entity with a	any cannot serve as its own Register an active Florida registration.)  eet address of the registered agent ar  Michailo Sorox Name  1807 Worringto	red Agent. You must designate an individual or re: chev on St Box NOT acceptable)

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Page I of 2

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. WISHEN OF CURYORATION

Title:		Name and Address:	
"AMBR" = Authorize	d Member		
"MGR" = Manager AMBR		Andriy Chernyshov	
	<del></del>	Rudnev sqr., House 14/1 #129A	
		Kharkiv, Ukraine 61000	
AMBR	_	Mikhail Yusupov	
	-	Mariinskiy Park, House 3/1 #17	
ì		Moscow, Russia 109469	
			<del></del>
<u> </u>	<del>_</del>		
(Use attachment if nec	essary)		
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