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(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
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(Do	cument Number)
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COVER LETTER

	Registration Section Division of Corporations		
SUBJEC	SJL LOGISTICS, LLC		
SOBJEC		Limited Liabili	ty Company
The encl	osed Articles of Organization and fee(s	a) are submitted	for filing.
Please re	turn all correspondence concerning this	s matter to the fo	ollowing:
	STEVEN J. LEONARD		
	100.1 10.1	Name of	Person
	SJL LOGISTICS, LLC		
		Firm/Co	npany
	7200 CORPORATE WAY, SUITE	204	
		Addre	ess
	MIAMI, FL 33122		
	SLEONARD@SJLLOGISTICS.CO	City/State and M	I Zip Code
	E-mail address: (to be u	ised for future a	nnual report notification)
For further	r information concerning this matter, pl	ease call:	
	Steven J. Leonard	305	761-0074
	Name of Person	Area Code	Daytime Telephone Number
Enclosed	l is a check for the following amount:		
\$125.00	Filing Fee \$\frac{130.00}{\text{Filing Fee \delta}}\$Certificate of Status	└──Certific	0 Filing Fee & \$160.00 Filing Fee, cd Copy Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

SJL LOGISTICS,		I I tabilia Camana	WILC 2 - will C 2)	_	
(Must el	nd with the words "Limited	Liability Company.	, "L.L.C.," or "LLC.")		
ARTICLE II - Address: The mailing address and stree	et address of the principal o	office of the Limited	Liability Company is:		
<u>Princ</u>	cipal Office Address:		Mailing Address:		
7200 Corporate W	Vay, Suite 204	7200	Corporate Way, Suite 204		
Miami, FL 33122			ni, FL 33122	_	
				_	
	any cannot serve as its own	Registered Agent. \	t's Signature: You must designate an individual or	_	
	any cannot serve as its own	Registered Agent. \		- 4 6	ger y 1814
(The Limited Liability Compa	any cannot serve as its own an active Florida registratio	Registered Agent. \on.)		16 MAR	900 s. \$108
(The Limited Liability Compa another business entity with a	any cannot serve as its own an active Florida registratio	Registered Agent. \on.)	You must designate an individual or	MAR 28	90 j. 1501 - 15
(The Limited Liability Compa another business entity with a	any cannot serve as its own an active Florida registratio eet address of the registered	Registered Agent. \on.)	You must designate an individual or	MAR 28	-
(The Limited Liability Compa another business entity with a	any cannot serve as its own an active Florida registratio eet address of the registered	Registered Agent. Yon.) d agent are:	You must designate an individual or	MAR 28 PH	e e Marie Ma Ma Ma Ma Ma Ma Ma Ma Ma Ma Ma Ma Ma
(The Limited Liability Compa another business entity with a	any cannot serve as its own an active Florida registration eet address of the registered Steven J. Leonard	Registered Agent. Yon.) d agent are: Name v, Suite 204	You must designate an individual or	MAR 28 PH	-
(The Limited Liability Compa another business entity with a	any cannot serve as its own an active Florida registration eet address of the registered Steven J. Leonard 7200 Corporate Way	Registered Agent. Yon.) d agent are: Name v, Suite 204	You must designate an individual or	MAR 28	MA COLOR

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.

(CONTINUED)

Registered Agent's Sygnature (REQUIRED)

Page 1 of 2

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
MGR	Steven J. Leonard
	7200 Corporate Way, Suite 204
	Miami, FL 33122
	e date of filing: (OPTIONAL) be specific and cannot be more than five business days prior to or 90 days
CLE V: Effective date, if other than the effective date is listed, the date must be of filing.) If the date inserted in this block doe	be specific and cannot be more than five business days prior to or 90 days not meet the applicable statutory filing requirements, this date will not be li
CLE V: Effective date, if other than the effective date is listed, the date must be of filing.) If the date inserted in this block does cument's effective date on the Departure.	be specific and cannot be more than five business days prior to or 90 days not meet the applicable statutory filing requirements, this date will not be liment of State's records.
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ARTICLE IV-

Page 2 of 2

\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)