

L16000065489

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To: Division of Corporations
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Email Address: _____

**FLORIDA LIMITED LIABILITY CO.
HUMBLE1 TRANSPORT LLC**

Certificate of Status	0
Certified Copy	0
Page Count	03
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MTM

4/5/2016

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16 APR -4 AM 11:58
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16 APR -4 PM 4:15
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Electronic Filing Menu

Corporate Filing Menu

Help

See corrected article.



April 4, 2016

FLORIDA DEPARTMENT OF STATE
Division of Corporations

E-FILE A.A.ALI, CPA

SUBJECT: HUMBLE1 TRANSPORT LLC
REF: W16000024706

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

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.

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

Sylvia Gilbert
Regulatory Specialist II
New Filing Section

FAX Aud. #: H16000081731
Letter Number: 116A00006808

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**ARTICLES OF ORGANIZATION
FOR FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I - Name:

The name of the Limited Liability Company is:

HUMBLE1 TRUCKING, LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing and street address of the principal office of the Limited Liability Company is:

**4799 WALDEN CIR. APT B
Orlando FL, 32811**

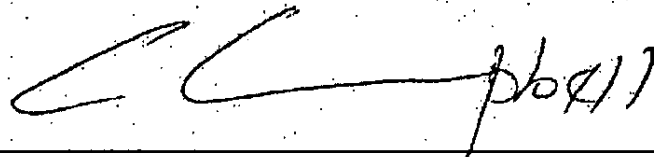
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(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:

**CHRISTOPHER CAMPBELL
4799 WALDEN CIR. APT B
ORLANDO, FL 32811**

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..



CHRISTOPHER CAMPBELL/ Registered Agent's Signature

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ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

"MGR" = Manager

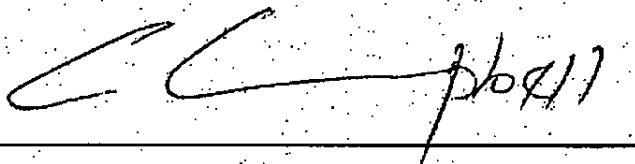
"MGRM" = Managing Member

CHRISTOPHER CAMPBELL - MGRM
4799 WALDEN CIR. APT B
ORLANDO, FL 32811

ARTICLE V: Effective date, if other than the date of filing: 4/01/2016

(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.)

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.)

CHRISTOPHER CAMPBELL

Typed or printed name of signer

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