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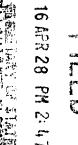
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· (Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Special Instructions to	Filing Officer:	
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COVER LETTER

TO: Registrati	ion Section of Corporations			李	S. A. S.
	s Logistics, LLC				
SUBJECT:	Nam	e of Limited L	iability Company		_
The enclosed Artic	les of Organization and f	ee(s) are subm	itted for filing.		
Please return all co	rrespondence concerning	this matter to	the following:		
Mahog	aney Hutt-Butler, Esq.				
		Nan	ne of Person		
The Hu	utt Law Firm				
		Firr	m/Company		
10500	Little Patuxent Pkwy, Su	nite 640			
			Address		
Columi	bia, Maryland 21044				
		City/Sta	te and Zip Code		
alflo970	4062@gmail.com				
	E-mail address: (to	be used for fut	ure annual report notif	ication)	
For further informati	ion concerning this matte	r, please call:			
Abiye L	Legesse	813 at (368-4162		
	Name of Person	Area Co	de Daytime Telep	hone Number	-
		•			
Enclosed is a check	c for the following amoun	nt:			
\$125.00 Filing Fee	\$130.00 Filing F Certificate of St	atus LLC	155.00 Filing Fee & ertified Copy itional copy is enclosed	Certifica d) Certified	Filing Fee, te of Status & Copy 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

	100 mm	13 s	(10 () () () () ()	
Addis Logistics, I	LC		·	
(Must en	d with the words "Limited"	Liability Company,	"L.L.C.," or "LLC.")	
RTICLE II - Address:				
e mailing address and street	address of the principal of	fice of the Limited !	Liability Company is:	
Princ	ipal Office Address:		Mailing Address:	
LI PO	par Office Addition		Mannik vand est	
14646 Wake Robin Drive			14646 Wake Robin Drive	
Brooksville, Florid RTICLE III - Registered A he Limited Liability Compa other business entity with a	a 34604 Agent, Registered Office, & any cannot serve as its own In active Florida registration	Registered Agent Y	ksville, Florida 34604	
Brooksville, Florid	agent, Registered Office, & ny cannot serve as its own In active Florida registration address of the registered a	Registered Agent Y	ksville, Florida 34604 t's Signature:	
Brooksville, Florid RTICLE III - Registered A he Limited Liability Compa other business entity with a	a 34604 Agent, Registered Office, & any cannot serve as its own In active Florida registration	Registered Agent Y	ksville, Florida 34604 t's Signature:	
Brooksville, Florid RTICLE III - Registered A he Limited Liability Compa other business entity with a	agent, Registered Office, & ny cannot serve as its own In active Florida registration address of the registered a	Registered Agent Registered Agent Y	ksville, Florida 34604 t's Signature:	
Brooksville, Florid RTICLE III - Registered A he Limited Liability Compa other business entity with a	a 34604 Agent, Registered Office, & any cannot serve as its own I active Florida registration at address of the registered and Abiye Legesse	Registered Agent Registered Agent Y	ksville, Florida 34604 t's Signature: 'ou must designate an individ	
Brooksville, Florid RTICLE III - Registered A he Limited Liability Compa other business entity with a	agent, Registered Office, & ny cannot serve as its own I n active Florida registration et address of the registered a Abiye Legesse	Registered Agent Registered Agent Y	ksville, Florida 34604 t's Signature: 'ou must designate an individ	

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 Signature (REQUIRED)

Page 1 of 2

16 APR 28 PH 2: 47

<u>Citle:</u> AMBR" = Authorized Member	Name and Address:
MGR" = Manager	
Abiye Legesse	14646 Wake Robin Drive
	Brooksville, Florida 34604
<u> </u>	
	
	
ctive date is listed, the date must be filing.)	late of filing: (OPTIONAL) specific and cannot be more than five business days prior to or 9
V: Effective date, if other than the cative date is listed, the date must be filling.)	specific and cannot be more than five business days prior to or 9 ot meet the applicable statutory filing requirements, this date will no
V: Effective date, if other than the cative date is listed, the date must be filing.) he date inserted in this block does n	e specific and cannot be more than five business days prior to or 9 ot meet the applicable statutory filing requirements, this date will no ent of State's records.
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V: Effective date, if other than the offiling.) the date inserted in this block does nent's effective date on the Departm VI: Other provisions, if any. EQUIRED SIGNATURE: Signature of a This document is exert am aware that any if	member of an authorized representative of a member. ecuted in accordance with section 605.0203 (1) (b), Florida Statutes, alse information submitted in a document to the Department of State gree felony as provided for in s.817.155, F.S.