# L17000128444

(Re	equestor's Name)		
(Ac	ldress)		
(Ac	ddress)		
(Cit	ty/State/Zip/Phone	e #)	
PICK-UP	☐ WAIT	MAIL	
(Bu	ısiness Entity Nan	ne)	
(Document Number)			
Certified Copies	_ Certificates	s of Status	
Special Instructions to Filing Officer:			

Office Use Only



100299345921

05/19/17--01004--003 \*\*125.00



W17-43852

M. MOON MAY 1 9 2017



## FLORIDA DEPARTMENT OF STATE Division of Corporations

May 23, 2017

THOMAS MATTHEWS 6938 TIMBER RUN RD YOUNGSTOWN, FL 32466

SUBJECT: PANHANDLER TRUCKING LLC

Ref. Number: W17000043852

We have received your document for PANHANDLER TRUCKING LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Matthew T Moon Regulatory Specialist II

Letter Number: 017A00010329

T JUN -7 AN II: 02

### **COVER LETTER**

	ew Filing Section ivision of Corporations		
SUBJECT	Panhandler Trucking LLC		
SUBJECT	Name of Limited Liability Company		
The enclos	ed Articles of Organization and fee(s)	are submitted for filing.	17 JUN-7 FE
Please retu	rn all correspondence concerning this	matter to the following:	1
	Thomas Matthews		errens serie
		Name of Person	ii.
		Firm/Company	
	6938 Timber Run Rd		
		Address	
	Youngstown, FL 32466		
	flroadrunner38@yahoo.com	City/State and Zip Code	
	E-mail address: (to be us	ed for future annual report notification)	<del></del>
For further i	nformation concerning this matter, ple	rase call:	
	Thomas Matthews	850 520 - 0494	
	Name of Person	Area Code Daytime Telephone Number	_
Enclosed in	s a check for the following amount:		
\$125.00 F	iling Fee \$130.00 Filing Fee & Certificate of Status	Certified Copy Certifica (additional copy is enclosed) 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

	ting LLC			
(Must c	ontain the words "Limited L	iability Company,	"L.L.C.," or "LLC.")	
TICLE II - Address:		•		
mailing address and stree	et address of the principal of	fice of the Limited	Liability Company is:	
<u>Prin</u>	Principal Office Address:		Mailing Address:	
6938 Timber Run	Rd.	6938	Timber Run Rd.	
Youngstown, FL 32466		Volu	ngstown, FL 32466	
TICLE III - Registered Limited Liability Comp	Agent, Registered Office, é	& Registered Ager Registered Agent.		
RTICLE III - Registered ne Limited Liability Compother business entity with	Agent, Registered Office, & any cannot serve as its own an active Florida registration eet address of the registered	& Registered Ager Registered Agent.	t's Signature:	or <u> </u>
RTICLE III - Registered ne Limited Liability Compother business entity with	Agent, Registered Office, é any cannot serve as its own i an active Florida registration	& Registered Ager Registered Agent.	t's Signature:	or <u> </u>
RTICLE III - Registered he Limited Liability Compother business entity with	Agent, Registered Office, & any cannot serve as its own an active Florida registration eet address of the registered	& Registered Ager Registered Agent. (2) agent are:	t's Signature:	or
RTICLE III - Registered he Limited Liability Compother business entity with	Agent, Registered Office, & any cannot serve as its own? an active Florida registration eet address of the registered  Cogency Global, Inc.	& Registered Ager Registered Agent. (2) agent are: Name	t's Signature: You must designate an individual	or <u> </u>
RTICLE III - Registered he Limited Liability Compother business entity with	Agent, Registered Office, & any cannot serve as its own an active Florida registration eet address of the registered Cogency Global, Inc.	& Registered Ager Registered Agent. (2) agent are: Name	t's Signature: You must designate an individual	or _

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 of registered agent as provided for in Chapter 605, 1.S...

Registered Agent's Signature (REQUIRED)

(CONTINUED)

# ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:	
"MGR" = Manager AMBR	Thomas Matthews 6938 Timber Run Rd. Youngstown, FL 32466	
	17 J	
<del></del>		
·		
(Use attachment if necessary)		
(If an effective date is listed, the date must be speci the date of filing.)	filing: (OPTIONAL)  fic and cannot be more than five business days prior to or 90 days after  et the applicable statutory filing requirements, this date will not be listed as  State's records.	
ACTIVES VI. Outer provisions, if any.		
REOUIRED SIGNATURE:	Matthe	
This document is executed I am aware that any false in	ber or an authorized representative of a member. in accordance with section 605.0203 (1) (b), Florida Statutes, formation submitted in a document to the Department of State clony as provided for in s.817.155, F.S.	
Thomas Matthews		
Ţ.	Typed or printed name of signee	

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)