

**L17000179739**

Florida Department of State  
Division of Corporations  
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**To:**

Division of Corporations  
Fax Number : (850) 617-6381

**From:**

Account Name : PADRO AND COMPANY, P.A.  
Account Number : I20050000094  
Phone : (305) 500-9361  
Fax Number : (305) 500-9492

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

**Email Address:** oscar.gonzalez@cargo.com.gt

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BUREAU OF COMMERCIAL  
INFORMATION SERVICES

**FLORIDA LIMITED LIABILITY CO.  
TSI - Trans Services International Group, LLC.**

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

FILED  
17 AUG 22 AM 8:41  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

AUG 23 2017

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August 22, 2017

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

PADRO AND COMPANY, P.A.

SUBJECT: TSI-TRANS SERVICES INTERNATIONAL GROUP, LLC  
REF: W17000068814

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.

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DANIEL L O'KEEFE  
Regulatory Specialist II

FAX Aud. #: H17000222412  
Letter Number: 017A00017193

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

TSI - Trans Services International Group, LLC .

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

ARTICLE II - Address:

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

Principal Office Address:

6750 NW 79 Ave Miami FL 33166

Mailing Address:

same

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:

Jose F. Padro

Name

2520 NW 97 Ave, Suite 120

Florida street address (P.O. Box **NOT** acceptable)

Miami

FL

33172

City

State

Zip

SECRETARY OF STATE  
ALLAHASSEE, FLORIDA

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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..



Registered Agent's Signature (REQUIRED)

(CONTINUED)

2/3

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**ARTICLE IV-**

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

**Title:**

"AMBR" = Authorized Member

"MGR" = Manager

AMBR

AMBR

**Name and Address:**

Oscar Jesus Gonzalez

711 Hiddenbrook Court

Highlands Ranch, Colorado. 80126

Monika Eva Merz de Moreno

Calle LLama del Bosque , Urbanizacion Madre Selva

Nivel Oficina 702 La Libertad, El Salvador, CA

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: 8/21/2017 (OPTIONAL)

(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.)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

**ARTICLE VI:** Other provisions, if any.

**REQUIRED SIGNATURE:**

Signature of a member or an authorized representative of a member.  
This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes.  
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.

Oscar Jesus Gonzalez

Typed or printed name of signer