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Florida Department of State  
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**FLORIDA LIMITED LIABILITY CO.  
GALE LOGISTICS LLC**

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ARTICLES OF ORGANIZATION  
OF  
GALE LOGISTICS LLC

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The undersigned, desiring to form a limited liability company (hereinafter the "Company") under and pursuant to the Florida Limited Liability Company Act, Chapter 605 and does hereby adopt the following Articles of Organization for the Company.

ARTICLE I : NAME

The name of the Company shall be: **GALE LOGISTICS LLC**

ARTICLE II : DURATION

The Company shall commence existence on the date these Articles of Organization are filed with the Florida Department of State. The period of the Company's duration shall be perpetual, unless the Company is dissolved earlier pursuant to the provisions of the Regulations or the Act.

ARTICLE III: ADDRESS

The place of business and mailing address of the Company shall be :  
17403 NW 48th Place Opa Locka, FL 33055  
and such other place or places as the members from time to time may determine.

ARTICLE IV : INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of the Company is :  
17403 NW 48th Place Opa Locka, FL 33055

The registered agent is : Giovanni Bustillo

and the principal business address of the Company shall be :  
17403 NW 48th Place Opa Locka, FL 33055

ARTICLE V : MANAGEMENT OF COMPANY

Management of the Company shall be vested in the Member and is, therefore, a Manager-managed company.

The members of this Company, and their respective membership shares shall be:

Giovanni Bustillo

100%



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ARTICLE VI: INDEMNIFICATION

The Company does hereby indemnify its Manager for any of their conduct on behalf of, or related to their duties as Manager of the Company and holds harmless for any acts on behalf of or in connection with its services for the Company.

ACCEPTANCE OF REGISTERED AGENT

Having been named as registered agent and to accept service of process for the above state limited liability company at the place designated in the Articles of Organization, I hereby accept this 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 this position as registered agent.

SIGNATURE

  
Giovanni Bustillo

DATE

10-23-17

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