

L18000195731

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

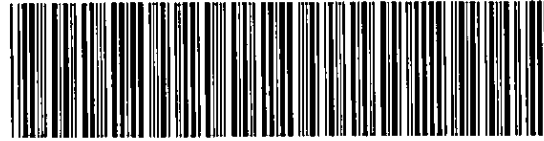
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

W18-62791

Office Use Only



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07/09/18--01028--025 **150.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2018 AUG 15 AM 8:11

FILED

AUG 16 2018

K. Brumbley

Mark Mays Transport, LLC.
1912 Pye Drive
Sebring, FL 33870
(804) 247-6460



August 9, 2018

Florida Department of State
P.O. Box 6327
Tallahassee, FL 32314

Dear Florida Department of State,

We sent in documents along with a \$150.00 check, check number #470 requesting for a conversion of Mark Mays Transport Inc. reference number P17000067605 to Become Mark Mays Transport, LLC. reference number W18000062791 with a file date of July 10th, 2018. We were notified that Mark Mays Transport Inc. reference number P17000067605 has not filed its annual reports and we have enclosed documents and fees for a Voluntary Dissolution of the company. We were unaware of the annual reports and fees being owed due to the Registered Agent's lack of correspondence and diligence in the matter. We are requesting to maintain the Mark Mays Transport, LLC. reference number W18000062791 as our current business name, and would like for the \$150.00 check, check number #470 to be applied to the filing fees of this business. Please feel free to contact Mark Mays at (804) 247-6460 with any further comments or questions.

Sincerely,

A handwritten signature in black ink that reads "Mark a mays".

Mark Mays



COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Mark Mays Transport, LLC
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Mark Mays
Name of Person

Firm/Company

1912 Pye Drive
Address

Sebring FL, 33870
City/State and Zip Code

markstransport@hotmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mark Mays at (804) 247-6460
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- ☐ \$125.00 Filing Fee
- ☒ \$130.00 Filing Fee & Certificate of Status
- ☐ \$155.00 Filing Fee & Certified Copy
(additional copy is enclosed)
- ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy
(additional 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

ARTICLE I - Name:

The name of the Limited Liability Company is:

MARK MAYS TRANSPORT, 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:

1912 PYE DRIVE
SEBRING, FLORIDA
33870

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:

Joy M Lee
Name
804 CRANE STREET
Florida street address (P.O. Box NOT acceptable)
SEBRING FL 33870
City Zip

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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..

Joy M Lee
Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

Name and Address:

MGR

MARK MAYS
1912 PYE DRIVE
SEBRING, FL 33870

(Use attachment if necessary)

ARTICLE V: 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.

MARK MAYS

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)