

L18000239774

(Requestor's Name)

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(Address)

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(Business Entity Name)

(Document Number)

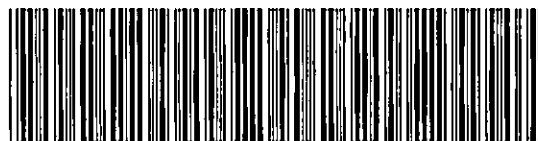
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FILING

TO: Registration Section
Division of Corporations

SUBJECT: FIKE TRANSPORTATION SOLUTIONS, LLC.

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

Please return all correspondence concerning this matter to the following:

Dawn-Lynn Fike
10538 Jackson Square Dr.
Estero, FL 33928
E-mail address (to be used for future annual report notification): DFike65@Comcast.net

For further information concerning this matter, please call:

Dawn-Lynn Fike at (412) 863-5661

Enclosed is a check for the following amount: \$125.00 Filing Fee

MAILING ADDRESS:

Department of State
Division of Corporations
Registration Section
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Department of State
Division of Corporations
Registration Section
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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**ARTICLES OF ORGANIZATION
OF
FIKE TRANSPORTATION SOLUTIONS, LLC**

ARTICLE I – NAME

The name of the limited liability company is FIKE TRANSPORTATION SOLUTIONS, LLC ("company").

ARTICLE II – ADDRESS

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

Principal Office Address:
10538 Jackson Square Dr.
Estero, FL 33928

Mailing Address:
10538 Jackson Square Dr.
Estero, FL 33928

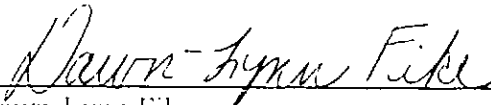
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**ARTICLE III - REGISTERED AGENT,
REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE:**

The name and the Florida street address of the registered agent are:

Dawn-Lynn Fike
10538 Jackson Square Dr.
Estero, FL 33928

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.



Dawn-Lynn Fike

ARTICLE IV - MANAGERS OR MEMBERS

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

Title:

"MGR" = Manager

"AMBR" = Authorized Member

Name and Address:

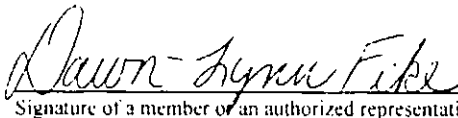
MGR

Dawn-Lynn Fike
10538 Jackson Square Dr.
Estero, FL 33928

ARTICLE V - EFFECTIVE DATE

The effective date of the company shall be October 11, 2018.

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.

Dawn-Lynn Fike

Typed or printed name of signee