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To: Division of Corporations Fax Number : (850)617-6381 From: Account Name : LAZARUS CORPORATE FILING SERVICE, INC. Account Number : 12000000019 : (305)552-5973 Phone Fax Number : (305)675-5944 \*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\* Email Address:\_\_\_ - ----FLORIDA LIMITED LIABILITY CO. - . **IVO CARGO LLC** Certificate of Status 1 **NON 50** Certified Copy 0 03 Page Count Estimated Charge \$130.00 Electronic Filing Menu Corporate Filing Menu Help

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### ÷. ARTICLES OF ORGANIZATION FOR. FLORIDA LIMITED LIABILITY COMPANY

#### ARTICLE I - Name:

The name of the Limited Liability Company is: (Mass and with the words "Limited Hability Company, "LLC," or "LIC."

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### ARTICLE II - Address:

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

16731 SW 5TH of #0 Waston FL 33326

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ARTICLE III - Registered Agent. Registered Office: The name and the Florida street address of the registered agent are: (The Linited Liability Company connot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

Contartese Holdings LLC 16732 SUN STU OT #0 WUSTON FL 33326

#### ARTICLE JV-

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

# CONTARTESE HOLDINGS LLC (MGR)

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Required Signatures:

Signature of a member or an authorized representative of a member.

In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penaltics of perjury that the facts stated herein are true. 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.

MeFi Contralass Typed or printed name of signee

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 1 am familiar with and accept the obligations of my position as registered agent as provided for in Chapter for the second second for the second seco

Register cd Agont's Signature (REQUIRED)

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