State Divis

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To:

Division of Corporations

Fax Number

3052201440

: (850)617-6381

From:

Account Name

: LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I20000000019

Phone

: (305)552-5973

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:										
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FLORIDA LIMITED LIABILITY CO. IMPORT CARGO LOGISTIC LLC

Certificate of Status	1
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Estimated Charge	\$130.00

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Corporate Filing Menu

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K. PAGE

MAY 08 2019

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:
Import Cargo Logistic LLC
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:
8309 NW 66+H ST
Migmi Florida 33166
ARTICLE III - Registered Agent, Registered Office: The name and the Florida street address of the registered agent are: (The Limited Liability Company carnot serve as us own Registered Agent. You must designate an individual or another business entity with an active Florida registration.) Your dicson Lameda
8309 NW 66th St
Miami Florida 33166
ARTICLE IV The name and title of each person authorized to manage and control the Limited Liability Company: (MGR or AMBR)
Yomadicson lameda (AMBR)
Lisber Lameda (MGR)

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 penalties 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.

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 cartificate, 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)