2,001/003

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FLORIDA LIMITED LIABILITY CO. 4 CARGO SERVICES LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

19 NOV 15 PM SA 19

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

4 CAR	GO SERVICES LLC	
	(Must contain the words "Limited Liabi	lity Company, "L.L.C.," or "LLC.")
ARTICLE II - Ad		
The mailing addre	es and street address of the principal office	of the Limited Liability Company is:
	Principal Office Address:	Mailing Address:
5981 N	W 102nd AVE	5981 NW 102nd AVE
DORA	L. FL 33178	DORAL, FL 33178
(The Limited Liab	egistered Agent, Registered Office, & Re ility Company cannot serve as its own Regi mitty with an active Florida registration.)	egistered Agent's Signature: stered Agent. You must designate an individual or
(The Limited Liab another business c	ility Company cannot serve as its own Regi	stered Agent. You must designate an individual or
(The Limited Liab another business c	ility Company cannot serve as its own Reginity with an active Florida registration.)	stered Agent. You must designate an individual or
(The Limited Liab another business c	ility Company cannot serve as its own Reginentity with an active Florida registration.) Florida street address of the registered ager	stered Agent. You must designate an individual or are:
(The Limited Liab another business c	ility Company cannot serve as its own Reginentity with an active Florida registration.) Florida street address of the registered agenometric ALEXIS ADAN	stered Agent. You must designate an individual or are:

Having been named as registered agent and to accept service of process for the above stated limited hability 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..

Alexis Adam

Registered Agent's Signature (REQUIRED)

Zip

(CONTINUED)

ARTICLE IV-

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

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Managet	
AMBR	ALEXIS ADAN
	5981 NW 102nd AVE
	DORAL, FL 33178
AMBR	DOMENICO PREVETTE
- HALDIC	5981 NW 102nd AVE
	DORAL, FL 33178
AMBR	ANA MARIA PREVETE
ARMBIC	5931 NW 102nd AVE
	DORAL, FL 33178
	

(Use ettachment if necessary)