12/12/2019

Division of Corporations

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FLORIDA LIMITED LIABILITY CO. CRUISE CONTROL TRANSPORT, LLC

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Help

AKTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICI	E1.	- Na	me:

The name of the Limited Liability Company is:

CRUISE CONTROL TRANSPORT, LLC

(Must conatin 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:

Mailing Address:

3215 NW 64 STREET MIAMI, FL 33166 MIAMI, FL 33166

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 acrive Florida registration.)

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

AMAURY CRUZ

Name

8215 NW 64 STREET STE 7

Florida street address (P.O. Box NOT acceptable)

МІАМІ City State

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.

stered Agent's Signature (REQUIRED)

(CONTINUED)

<u>fitle:</u> "AMBR" = Authorized Member "MGR" = Manager	Name and Address:
MGR	AMAURY CRUZ 8215 NW 64 STREET, STE 7 MIAMI, FL 33166
MGR	JOSE HERNANDEZ 8215 NW 64 STREET STE 7 MIAMI, FL 33166
(Use attachment if necessary)	
EV: Effective date, if other than the di	ate of filing: 01/01/2020 (OPTIONAL) specific and cannot be more than five business days prior to or 90 (

REQUIRED SIGNATURE:

ARTICLE VI: Other provisions, if any.

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.

AMAURY CRUZ

Typed or printed name of signed

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)