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COVER LETTER

New Filing Section Division of Corporations RB AUTU Transportation U.C. TO: SUBJECT: Name of Limited Liability Company

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

Please return all correspondence concerning this matter to the following:

Randolph Bush Jr
Name of Person
RB Transportation
Firm/Company
736e Willie Kuth Williams LN
Address
Quincy F1 32351
City/State and Zip Code
Randy Bush 2 @ Yahoo. com

- E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Randy Bush at (850) 766-6356 Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

5125.00 Filing Fee

□\$130.00 Filing Fee & Certificate of Status El\$155.00 Filing Fee & Certified Copy (additional copy is enclosed) ☐\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address

New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address New Filing Section Division The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:



ARTICLE II - Address:

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



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 active Florida registration.)

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



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. Thereby accept the appointment as registered agent and agree to act in this capacity. T 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.

Arthur, Franka Registered Agent's Signature (REQUIRED)

(CONTINUED)

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ARTICLE IV-

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

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" - Manager <u>AMBR</u>	Randolph Bush Jr.
MGR	Anthony Johnson
(Use attachment if necessary)	
(If an effective date is listed, the date must be specific the date of filing.)	ling: (OPTIONAL) c and cannot be more than five business days prior to or 90 days after the applicable statutory filing requirements, this date will not be listed as tate's records.
ARTICLE VI: Other provisions, if any.	

REOUIRE	DSIGNATURE
	Kunkan
	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 \cdot S. K G h C U I h
	Typed or printed name of signee

- \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
- \$ 30.00 Certified Copy (Optional)
- S 5.00 Certificate of Status (Optional)