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(Address)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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Incorporating Services, Ltd.

1540 Glenway Drive Tallahassee, FL 32301 850.656.7956

Fax: 850.656.7953 www.incserv.com

e-mail: accounting@incserv.com

ORDER FORM

TO Florida Department of State
The Centre of Tallahassee
2415 North Monroe Street, Suite 810
Tallahassee, FL 32303
corphelp@dos.myflorida.com
850-245-6051

FROM, Melissa Stops mstops@incserv.com 850.656.7953

REQUEST DATE 7/6/2020

PRIORITY : Routine

OUR REF # (Order ID#): 837589

ORDER ENTITY

ANCIENT ALIENS TRANSPORT LLC

PLEASE PERFORM THE FOLLOWING SERVICES:
ANCIENT ALIENS TRANSPORT LLC (FL)

New LLC filling

NOTES:

\$125.00 Authorized

Email address for annual report reminders: shelems@sundocfilings.com

RETURN/FORWARDING INSTRUCTIONS:

ACCOUNT NUMBER: 120050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,

Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company, is:

Ancient Aliens Transport LLC

(Must contain the words "Limited Liability Company, "L.L.C.," or "LIC."

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

2225 14th Avenue West Bradenton, FL 34205

2225 14th Avenue West Bradenton, FL 34205

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

Zachary Papaioannoi

NAME OF STREET

2505 MinAvenue West

talonida successibilitas (P.O. Box NO Pares par bile

Bradenton

FL,

34205

City

State

Zip ·

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 performance agent the provision of my performance of my duties.

Registered Agents Signature (REOUTRED)

ONTINUEL

"AMBR" = Authorized Member "MGR" = Manager MGR. Kenneth Miller 2225 14th Avenue West Bradenton Florida 34205 (Use attachment if necessary) TICLE V: Effective date, if other than the date of filing: (OPTIONAL) an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days afted ate of filing.) te: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed document's effective date on the Department of State's records. TICLE VI: Other provisions, if any. REQUIRED SIGNATURE Signatuse of a member of an authorized representative of a member. This document is executed by assert date 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. Sheila Helems Typed or printed name of sience.	Title:		Name and Address:
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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)

ARTICLE IV-