

L20000290419

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)



PICK-UP



WAIT



MAIL

(Business Entity Name)

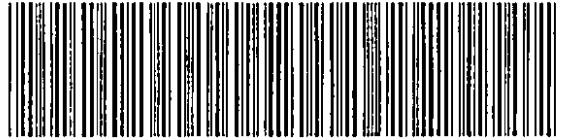
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

W20000109511

Office Use Only



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09/22/20--01011--008 \*\*130.00

FILED  
2020 SEP 23 PM 3:34  
SECRETARY OF STATE  
TALLAHASSEE, FL

2020 SEP 22 PM 1:13  
FILED  
TALLAHASSEE, FL

COVER LETTER

TO: New Filing Section  
Division of Corporations

SUBJECT: CG Trucking  
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:

Christopher Gilyard  
Name of Person

CG Trucking  
Firm/Company

4524 Wesley Drive  
Address

Tallahassee, FL 32303  
City/State and Zip Code

Cpg292@yahoo.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Christopher Gilyard SSU 363-5213  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$125.00 Filing Fee

☒ \$130.00 Filing Fee &  
Certificate of Status

☐ \$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



SEP 23 PM 3:21

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

September 23, 2020

CHRISTOPHER GILYARD  
4524 WESLEY DR  
TALLAHASSEE, FL 32303 US

SUBJECT: CG TRUCKING LLC  
Ref. Number: W20000109511

We have received your document for CG TRUCKING LLC and check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is P17000059204.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Carlos E Rico  
Regulatory Specialist III

Letter Number: 320A00018246

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

CG Transportation LLC  
(Must contain 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:

4524 Wesley Drive  
Tallahassee FL  
32303

Mailing Address:

4524 Wesley Drive  
Tallahassee FL  
32303

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:

Christopher Gulyarci  
Name  
4524 Wesley Drive  
Florida street address (P.O. Box NOT acceptable)  
Tallahassee FL 32303  
City State Zip

SECRETARY OF STATE  
TALLAHASSEE, FL

2020 SEP 23 PM 3:35

FILED

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.

Christopher Gulyarci  
Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

MGR

Name and Address:

Christopher Gulyard  
1521 N. 21st Ave  
Tallahassee, FL 32303

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TALLAHASSEE, FL

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:

Christopher Gulyard

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.

Christopher Gulyard

Typed or printed name of signee

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)