lorida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : LAW OFFICE OF CONRAD WILLKOMM, P.A.

Account Number : I20200000174 Phone : (239)262-5303

Fax Number : (239)262-6030

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: CONTOID WSW Florida law. com

FLORIDA LIMITED LIABILITY CO. CARGO ST. MJS, LLC

Certificate of Status	1
Certified Copy	1
Page Count	03
Estimated Charge	\$160.00

J. FASON

OCT 1 5 2020

Electronic Filing Menu

Corporate Filing Menu

Help

Page: 3 of 5 10/14/2020 11:06 AM H2 0000357 624 3

COVER LETTER

	Registration Section Division of Corporations
SUBJEC	CARGO ST. MJS, LLC
SUBJEC	Name of Limited Liability Company
The encle	osed Articles of Organization and fee(s) are submitted for filing.
Please re	turn all correspondence concerning this matter to the following:
	Conrad Willkomm Esq.
	Name of Person
	Law Office of Conrad Willkomm, P.A.
	Firm/Company
	3201 Tamiami Trail N, 2nd Floor
	Address
	Naples, FL 34103
	City/State and Zip Code
	E-mail address: (to be used for future annual report notification)
For further	information concerning this matter, please call:
To turner	- · · · · · · · · · · · · · · · · · · ·
	Conrad Willkomm 239 262-5303 at ()
	Name of Person Area Code Daytime Telephone Number
Enclosed	is a check for the following amount:
\$125.001	Filing Fee \$130.00 Filing Fee & S155.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) S160.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address

Mailing Address

New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address

New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Page: 4 of 5

10/14/2020 11:06 AM

H20000357629 3

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

CARGO ST. MJS, LLC	
(Must end with the words "Limited Liab	ility Company, "L.L.C.," or "LLC.")
DTICLE U. Address.	
RTICLE II - Address: he mailing address and street address of the principal office Principal Office Address:	of the Limited Liability Company is: Mailing Address:
he mailing address and street address of the principal office	

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

another business entity with an active Florida registration.)

Law Office of Con-	rad Willkomm, P.A.	
	Name	
3201 Tamiami Trai	N, 2nd Floor	
Florida street addre	ess (P.O. Box <u>NOT</u> acc	eptable)
Naples	Florida	34103
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 position as registered agent as provided for in Chapter 605, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page I of 2

2020 OCT | 4 AM 10: 59

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
MGR	Jeffrey R. Stewart
	16242 Via Embeleso
	San Diego, CA 92128
ective date is listed, the date must be spo of filing.)	of filing:
EV: Effective date, if other than the date ective date is listed, the date must be sport filing.) The date inserted in this block does not nument's effective date on the Department. EVI: Other provisions, if any.	ecific and cannot be more than five business days prior to or 90 concet the applicable statutory filing requirements, this date will not be of State's records.
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