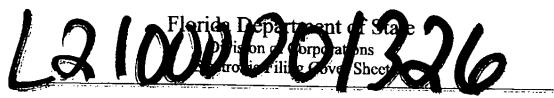
[7]



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H210000026173)))



H210000026173ABCT

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:	Division of Co		60
	Division of Co		6.0
	Fax Number	: (850)617-6381	•
From:			
	Account Name	: LAZARUS CORPORATE FILING SERVICE,	INC.
	Account Number	: I20000000019	
1.34	Phone	: (305)552-5973	
	Fax Number	: (305)675-5944	
•		, ,	<u> </u>
			9.5
**Enter	the email addres	s for this business entity to be used	l for futur
อกเ	nual report mail:	ings. Enter only one email address pl	ease. ** 🤝
F.m.	ail Address:		

## FLORIDA LIMITED LIABILITY CO. FIRST ONE TRANSPORT LLC

ZAN 0 5 2021 T. SCOTT

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

· EIN: 86-1208374

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:		
First one Transport LLC		
ARTICLE II - Address: The mailing address and street address of the principal office of the Linguister	nited Liab	33/4/
ARTICLE III - Registered Agent, Registered Office: The name and the Florida street address of the registered agent are: (The Company cannot serve as its own Registered Agent. You must designate an individual or another with an active Florida registration.)	he Limited Lial business entity	bility
Orlando Batista	•	
7135 Collins Ave Ph3 miami		
Beach F1 33141		
ARTICLE IV The name and title of each person authorized to manage and control Liability Company: (MGR or AMBR)	the Limit	ed
Orlando Batista 12.	<b>6</b> 29	
(AMAP)	•	021
	, 11:	₹ D

Required Signatures:

Signature of a member or an authorized representative of a member.

In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. 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.

Typed or printed name of signee

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: is provided for

in Chapter 605, F.S..

Registered Agent's Signature (REQUIRED)