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(Requestor's Name)
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PICK-UP WAIT MAIL
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Certified Copies Certificates of Status
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COVER LETTER

	New Filing Section Division of Corporations	2021			
SUBJECT	GLOBAL STEEL CONTAINERS, LLC				
Name of Limited Liability Company					
	sed Articles of Organization and fee(s) are submitted for filing.	PH 3: 0			
Please retu	urn all correspondence concerning this matter to the following:	Ü			
	Christopher R. Turner, Esq.				
	Name of Person				
	Christopher R. Turner, PLLC				
	Firm/Company				
	2600 E. Robinson Street				
	Address				
	Orlando, FL 32803				
	City/State and Zip Code				
-	chris@ertlegal.com E-mail address: (to be used for future annual report notification)				
For further in	information concerning this matter, please call:				
	Christopher Turner 407 796-2278 at ()				
	Name of Person Area Code Daytime Telephone Number	er			
Enclosed is	s a check for the following amount:				
≣\$125,00	Certificate of Status Certified Copy Cer (additional copy is enclosed) Cert	160.00 Filing Fee, tificate of Status & tified Copy ional 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 FLORIDALIMITED LIABILITY COMPANY

ARTICLE 1 - Name:

The name of the Limited Liability Company is:	
GLOBAL STEEL CONTAINERS, LL	.Ç
(Must contain the words "Lin	mited Liability Company, "L.L.C.," or "LLC,")
ARTICLE II - Address:	
The mailing address and street address of the princ	cipal office of the Limited Liability Company is:
Principal Office Address	s: <u>Mailing Address</u> :
20004 NW 52nd Court Lot 619	20004 NW 52nd Court Lot 619
Miami Gardens, FL 33055	Miami Gardens, FL 33055
ARTICLE III - Registered Agent, Registered O (The Limited Liability Company cannot serve as it another business entity with an active Florida regi	is own Registered Agent. You must designate an individual or istration.)
Christopher R.	Turner, Esq.
	Name
2600 E. Robins	ion Street
Florida street a	address (P.O. Box NOT acceptable)

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 spall 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..

State

Orlando

City

Registered Agent's Signature (REQUIRED)

32803

Zip

(CONTINUED)

ARTICLE IV-

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

<u>Title:</u>	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
MGR	Roberto L., Diaz 20004 NW 52nd Court Lot 619
	Miami Gardens, FL 33055
<u> </u>	
	
	
(If an effective date is listed, the date must the date of filing.)	e date of filing:
ARTICLE VI: Other provisions, if any.	
	7
REOUIRED SIGNATURE:	THE
This document is e I am aware that any constitutes a third o	a member or an authorized representative of a member. xecuted in accordance with section 605.0203 (1) (b). Florida Statutes, false information submitted in a document to the Department of State legree felony as provided for in s.817.155, F.S.
C	Typed or printed name of signee
	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)