

L21000106910

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

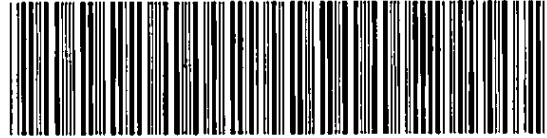
(Business Entity Name)

(Document Number)

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

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Office Use Only



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13/5/2017 10:03 AM

2021 MAR 16 AM 10:09

15 AM 9:25

COVER LETTER

TO: New Filing Section  
Division of Corporations

SUBJECT: C2G LOGISTICS LLC  
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:

JUAN CARLOS MANUEL GARCIA

Name of Person

Firm/Company

5214 28<sup>th</sup> PL SW

Address

NAPLES, FL 34116

City/State and Zip Code

C2G.305@GMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JUAN CMGARCIA at ( 305 ) 306-4233  
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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

C2G LOGISTICS 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:

5214 28th PL SW  
NAPLES, FL 34116

Mailing Address:

5214 28th PL SW  
NAPLES, FL 34116

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:

JUAN CM GARCIA

Name

5214 28th PL SW

Florida street address (P.O. Box **NOT** acceptable)

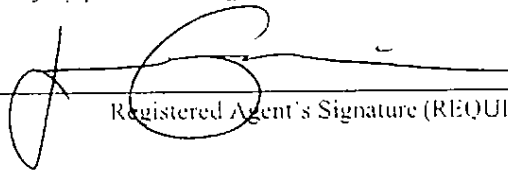
NAPLES FL 34116

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)

2021 MAR 16 AM 10:09

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:

JUAN CM GARCIA

5214 28<sup>th</sup> PL SW  
NAPLES, FL 34116

MGR

MANUEL GARCIA

5214 28<sup>th</sup> PL SW  
NAPLES, FL 34116

(Use attachment if necessary)

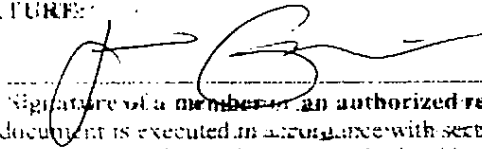
ARTICLE V: Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)

(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 entered on this form does not meet the appropriate statutory filing requirements, this date will not be recorded in the public records of the Department of State's records.

ARTICLE VI: Other provisions, if any: \_\_\_\_\_

REGISTERED SIGNATURE:



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

This document is executed in accordance with section 605.0265 (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.817.195, F.S.

JUAN CM GARCIA

Typed or printed name of signer

Filing Fees:

US \$600 (Filing fee) + \$60 (Annual Registration and Designation of Registered Agent)