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(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
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FALL AND DEEL HORIDA

		cov	ÆR LETTEI	ł			
TO:	New Filing Section Division of Corporations						
SUBJE	Half Time 1	Trucking LLC					
2.0	<u></u> -	Name of Lim	ited Liability	Company			
The enc	losed Articles of	Organization and fee(s) are	submitted for	filing.			
Please r	eturn all correspo	indence concerning this mai	tter to the foll	owing:			
	Wayne Jama	rick Johnson					
	<u> </u>		Name of Pe	rson			
	Firm/Company 8923 Forrest Oak Dr						
			Address				
	Penscaola, F.	L 32506					
		Ci	ity/State and Z	ip Code			
		n23@yahoo.com					
	F	E-mail address: (to be used	for future ann	ual report notificati	on)		
For furthe	er information co	ncerning this matter, please	call:				
	Wayne Jamar	rick Johnson 25	1 :	2296007			
	Nam			Daytime Telephon	e Number		
Enclose	d is a check for th	ne following amount:					
□\$125	.00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	Certified	0 Filing Fee & Copy copy is enclosed)	■\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		

Mailing Address

New Filing Section Division of Corporations

Street Address New Filing Section Division The Centre of Tallahassee

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Half Time Trucking	z LLC				
(Must cor	ntain the words "Limited I	Liability Company,	"L.L.C.," or "LLC.")		
ARTICLE II - Address:		ee ea tinin l	1 (al-like, Charamania)		
The mailing address and street	address of the principal o	ince of the Limited	Liability Company is:		
<u>Princi</u>	pal Office Address:		Mailing Address:		
8923 Forrest Oak I			Forrest Oak Dr		
Pensacola, FL 3250		Pensacola, FL 32506			
ARTICLE III - Registered A	gent, Registered Office,	& Registered Agei	nt's Signature:		
ARTICLE III - Registered A The Limited Liability Comparenother business entity with an	gent, Registered Office, 1y cannot serve as its own 1 active Florida registratio	& Registered Ager Registered Agent. 7 nr.)			
ARTICLE III - Registered A The Limited Liability Comparinother business entity with an	gent, Registered Office, 1y cannot serve as its own 1 active Florida registratio	& Registered Ager Registered Agent. (on.) Lagent are:	nt's Signature:		
ARTICLE III - Registered A The Limited Liability Comparanother business entity with an	gent, Registered Office, ny cannot serve as its own nactive Florida registration et address of the registered	& Registered Agent. Tegistered Agent. Ten.)	nt's Signature:		
ARTICLE III - Registered A The Limited Liability Comparinother business entity with an	gent, Registered Office, ny cannot serve as its own nactive Florida registration et address of the registered	& Registered Ager Registered Agent. (on.) Lagent are:	nt's Signature:		
ARTICLE III - Registered A (The Limited Liability Comparanother business entity with an	gent, Registered Office, ny cannot serve as its own n active Florida registratio et address of the registerec Wavne Jamarick Joh	& Registered Agent. (on.) I agent are: Inson Name	nt's Signature: You must designate an individual or		
ARTICLE III - Registered A	gent, Registered Office, ny cannot serve as its own n active Florida registration address of the registered Wavne Jamarick Joh 8923 Forrest Oak Dr	& Registered Agent. (on.) I agent are: Inson Name	nt's Signature: You must designate an individual or		

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..

(CONTINUED)

Registered Agent's Signature (REQUIRED)

DΊ	111	$^{\circ}$	H.	$\mathbf{t}V_{-}$

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

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	DI 1.1.1
<u>MGR</u>	Rhonda Johnson 64 Ponda Rosa Dr
	Atmore, AL 36502
MGR	Kim Henderson 8923 Forrest Oak Dr
	Pensacola, FL 32506
	-
(I be assumbed us if a common	
(Use attachment if necessary)	
ARTICLE V: Effective date, if other than the	date of filing: (OPTIONAL)
	pe 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 a
the document's effective date on the Departi	
ARTICLE VI: Other provisions, if any.	
ARTICISE VI. Other provisions, it any.	
-	
REQUIRED SIGNATURE:	
11)	101 200
Signature of	a member or an authorized representative of a member.
This document is e	xecuted in accordance with section 605.0203 (1) (b). Florida Statutes.
	refalse information submitted in a document to the Department of State legree felony as provided for in s.817.155, F.S.
<u>Wavne Jama</u>	arick Johnson Typed or printed name of signee
	Typed of printed name of signee