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(Requestor's Name)	_
(Address)	
(Address)	
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☐ PICK-UP ☐ WAIT ☐ MAIL	
(Business Entity Name)	
(Document Number)	
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COVER LETTER

	lew Filing Section Division of Corpo							
SUBJECT	Gearhead Log	istics LLC						
Souther	•	Name (f Limi	ted Liabi	ity Company			
The enclos	sed Articles of Org	ganization and fee	(s) are	submittee	l for filing.			
Please retu	ırn all correspond	ence concerning th	is matt	ter to the	following:			
	Gabiel Enrique	Lopez Colon						
				Name of	`Person			
			•	Firm/Co	unnunu			
				riii/Ct	mpany			
	3901 Monza Dr	·						
				Addı	ess			
	Sebring, FL 338	72						
	gelc.bus@gmail.e	rom	Cit	y/State ar	d Zip Code			
			used f	or future	annual report notifica	tion)		
For further i	information conce	rning this matter. [olease (call:				
	Gabriel E Lopez		540 it (998-7913			
	Name o	f Person	`	ra Code	Daytime Telephor	ne Number		
Enclosed i	is a check for the f	ollowing amount:						
□\$125.00		■\$130.00 Filing F Certificate of Statu		Certif	5.00 Filing Fee & ed Copy al copy is enclosed)	☐\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
	<u>Mailing</u> A New Filin	g Section			Street Address New Filing Section E			
Division of Corporations				The Centre of Tallahassee				

P.O. Box 6327 Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

A	RT	IC	LF	I – ľ	Vа	me:

The name of the Limited Liability Company is:

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SECRETARY OF STATE TALLAHAUSEE, FL

Gearhead 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:

<u>P</u>	rincipal Office Address:		Mailing Address:		
3901 Monza I	r.	3901	Monza Dr.		
Sebring, FL 3.	3872	Sebri	Sebring, FL 33872		
			ou must designate an individual c		
ner business entity w	ith an active Florida registration street address of the registered Gabriel E Lopez Col	I agent are: on Name			
ner business entity w	ith an active Florida registration street address of the registered Gabriel E Lopez Col	I agent are: on Name	ceptable)		
ner business entity w	ith an active Florida registration street address of the registered Gabriel E Lopez Col	1 agent are: on Name Dy	ceptable)		

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)

	n	Т	ı,		С	ı	٠,	
А	к		и	 			v	_

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

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	
AMBR	Gabriel E Lopez Colon
	3901 Monza Dr. Sebring, FL 33872
AMBR	Edithmar Davila Adorno 3901 Monza Dr. Sebring, FL 33872
	3701 MONIZATAL SCHIME. 11: 336/2
	<u></u>
(If an effective date is listed, the date must be the date of filing.)	date of filing:
the document's effective date on the Departm	
ARTICLE VI: Other provisions, if any.	
<u>REQUIRED</u> SIGNATURE:	Herry
	member or an authorized representative of a member.
I am aware that any	ecuted in accordance with section 605.0203 (1) (b). Florida Statutes, false information submitted in a document to the Department of State egree felony as provided for in s.817.155. F.S.
Gabiel Enrice	ie Lopez Colon
	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)