Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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.

(((H21000363074 3)))



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

To:

Division of Corporations

Fax Number : (850)617-6391

From:

Account Name : GRAYROBINSON, P.A. - ORLANDO

Account Number : I20010000078 : (407)843-8880

Phone : (407)244-5690 Fax Number

**Enter the email address for this business entity to be used for future

annual report mailings. Enter only one email address please. ** asond@5dtropical.com

FLORIDA LIMITED LIABILITY CO.

AD Direct Shipping, LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$125.00

Help

(((H21000363074 3)))

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name;

The name of the Limited Liability Company is: AD DIRECT SHIPPING, LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

6507 Bob Head Road Plant City, Florida 33565

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

Jeson Diaz

. 6507 Bob Head Road
Florida street address (P.O. Box NOT acceptable)

Plant City, Florida 33565 City, State, and 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 regarded agent as provided for in Chapter 605, F.S.

Registered Agent's Signature: Jason Diaz

Jason Diaz, Authorized Representative
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 penaltics of perjury that the friend stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes withird degree felony as provided for in s.817.155, F.S.)

Typed or printed name of signee

#45464043 v2