DivisiorApr. 19. 2022s12:38PM

2





(shown below) on the top and bottom of all pages of the document.

(((H22000141466 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)617-6381
From:	
	Account Name : GARY, DYTRYCH & RYAN, P.A.
	Account Number : 119990000255
	Phone : (561)844-3700
	Fax Number : (561)844-2388
**Enter	the email address for this business artitude to be a s
anr	the email address for this business entity to be used for future nual report mailings. Enter only one email address please.**
Ema	ail Address:
L HOUNG	FLORIDA LIMITED LIABILITY CO.
I:51	
H 1:51	TAITER TRANSPORTATION, LLC
PH 1:51	TAITER TRANSPORTATION, LLC Certificate of Status 0
19 PH 1:51	TAITER TRANSPORTATION, LLC
PR 19 PM 1:51	TAITER TRANSPORTATION, LLC Certificate of Status 0
APR 19 PH 1:51	TAITER TRANSPORTATION, LLC Certificate of Status 0 Certified Copy 0 Page Count 01
02	TAITER TRANSPORTATION, LLC Certificate of Status 0 Certified Copy 0
2022 APR 19 PM 1:51	TAITER TRANSPORTATION, LLC Certificate of Status 0 Certified Copy 0 Page Count 01
2022 APR 19 PH 1:51	TAITER TRANSPORTATION, LLC Certificate of Status 0 Certified Copy 0 Page Count 01

11

Apr. 19. 2022 12:38PM (((H220001414663)))

No. 2387 P. 2

۰.

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:

The name of the Limited Liability Company is:

TAITER TRANSPORTATION, LLC

n • • • • • • •

(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:	Mailing Address:
1090 JUPITER PARK DR STE 101	1090 JUPITER PARK DR STE 101
JUPITER, FL 33458	JUPITER, FL 33458

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:

ALYS N. DANIELS, ESO. Name 701 US HIGHWAY ONE, SUITE 402 Florida street address (P.O. Box NOT acceptable) NORTH PALM BEACH FL 33408

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.

Alya N. Daniels, Eg. Registered Agent's Signature (REQUIRED)

(CONTINUED)

(((H22000141466 3)))

FILED

Apr. 19. 2022 12:38PM

(((H22000141466 3)))

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

ROBERT D. CAMERLINCK 1090 JUPITER PARK DRIVE, STE 101 JUPITER, FL 33458

Name and Address:

(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 inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:

ROBERT D. CAMERLANCK

Signature of a member or an authorized representative of a member. This document is executed in accordance with section 605.0203 (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.817.155, F.S.

ROBERT D. CAMERLINCK

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 5.00 Certificate of Status (Optional)



(((H22000141466 3)))