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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I20000000019 Phone : (305)552-5973 Fax Number : (305)675-5944

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FLORIDA LIMITED LIABILITY CO. **D&M 87 TRANSPORT LLC**

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

ARTICLES OF ORGANIZATION

FOR FLORIDA LIMITED LIABILITY COMPANY	CABI DIVISIO TALL	2021.HAY
ARTICLE I - Name: The name of the Limited Liability Company is:		7 10 PM
D&W. 87 TRANSPORT LEC	PORATION FLORIDA	- 22 - 25 - 24
ARTICLE II - Address: The mailing address and street address of the principal office of the Limit Company is:	ed Liability	<i>i</i>
6950 W 6TH AVE APT 509		
HIALEAH FL 33014	***	
	· 	
ARTICLE III - Registered Agent, Registered Office: The name and the Florida street address of the registered agent are: (1) is Company cannot serve as its own Registered Agent. You must designate an individual or another but with an active Florida registration.)		Y
Candido E Sainz Dominguez -6950 W 6TH AVE APT 509		
HIALEAH FL 33014		
ARTICLE IV The name and title of each person authorized to manage and control Liability Company: (MGR or AMBR)	the Limited	Į,
Pandido & Sainz Dominguez	(AMR	<u>sr)</u>
	<u> </u>	

Required Signatures:

3052201440



In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. 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.

Typed or printed name of signee

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 herely 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)