

**Electronic Articles of Organization  
For  
Florida Limited Liability Company**

**L22000254918  
FILED 8:00 AM  
June 03, 2022  
Sec. Of State  
jafason**

**Article I**

The name of the Limited Liability Company is:  
ROIALTE COURIER SERVICE "LLC"

**Article II**

The street address of the principal office of the Limited Liability Company is:  
21406 SE 69TH AVE  
HAWTHORNE, FL. US 32640

The mailing address of the Limited Liability Company is:  
8612 N 40 STREET  
TAMPA, FL. US 33604

**Article III**

Other provisions, if any:

MEMBERS ONLY CAN PURCHASE SHARES IN THIS ENTITY, NO OUTSIDE  
PURCHASE ARE ALLOWED IF A MEMBER WANTS TO RELIEF ONE SELF  
OF APART OR ALL ANOTHER MEMBER MUST PURCHASE SAME AND THE  
MEMBER MUST RESIGN. THIS IS A MEMBER MANAGED  
LLC

**Article IV**

The name and Florida street address of the registered agent is:  
CIERA WATSON  
21406 SE 69TH AVE  
HAWTHORNE, FL. 32640

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.

Registered Agent Signature: CIERA WATSON

## **Article V**

The name and address of person(s) authorized to manage LLC:

Title: AP  
CIERA WATSON  
21406 SE 69TH AVE  
HAWTHORNE, FL. 32640 US

Title: AMBR  
BESTTIRESHOPONLINE.COM  
6601 N 40TH STREET  
TAMPA, FL. 33610

Title: MGR  
BESTTIRESHOPONLINE.COM  
6601 N 40TH STREET  
TAMPA, FL. 32610

Title: AP  
CIERA WATSON  
21406 SE 69 AVE  
HAWTHORNE, FL. 33640 US

Title: AMBR  
BESTTIRESHOPONLINE.COM  
6601 N 40TH STREET  
TAMPA, FL. 33610 US

Title: AP  
BESTTIRESHOPONLINE.COM  
6601 N 40 STREET  
TAMPA, FL. 33610 US

## **Article VI**

The effective date for this Limited Liability Company shall be:

05/28/2022

Signature of member or an authorized representative

Electronic Signature: CIERA WATSON

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that 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. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.

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