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(((H22000201135 3)))



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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : GERALD WEINBERG, P.C.

Account Number : I20030000043 : (800)342-9856

: (800)354-3381 Fax Number

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:\_

## FLORIDA LIMITED LIABILITY CO. LRJ AIR CARGO MANAGEMENT LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

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Help

ARTICLE I - Name: The name of the Limited Liability	Company is:		
	RJ AIR CARGO MANAC		
(Must contain	n the words "Limited Liab	ility Company, "L.I	L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street add	dress of the principal office	of the Limited Lial	bility Company is:
<u>Principal</u>	Office Address:		Mailing Address:
4110 NE 15TH TERR OAKLAND PARK, F	L 33334	SUITE E STATES egistered Agent's	NISLAND, NY 10309 Signature:
(The Limited Liability Company of another business entity with an ac	annot serve as its own Reg tive Florida registration.)	istered Agent. You	must designate an individual or
The name and the Florida street ac	ddress of the registered age	nt are:	
	MICHAEL BOSCO_		
	Ne	me	
	4110 NE 15TH TERRAC	E	
	Florida street address (P.	O. Box <u>NOT</u> accep	etable)
	OAKLAND PARK	FLORIDA	33334
	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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

PILLED

REJUN-9 M 9: 17

(11)2222222222222

<u>Title:</u> "AMBR" = Authorized Member	on authorized to manage and control the Limited Liability Company:  Name and Address:
"MGR" = Manager	
AMBR	MICHAEL BOSCO 4110 NE 15TH TERRACE OAKLAND PARK, FL 33334
<del></del>	
an effective date is listed, the date must	ne date of filing: (OPTIONAL) the specific and cannot be more than five business days prior to or 90 days
TICLE V: Effective date, if other than the an effective date is listed, the date must date of filing.)  ote: If the date inserted in this block does document's effective date on the Department.	is not meet the applicable statutory filing requirements, this date will not be li-
RTICLE V: Effective date, if other than the an effective date is listed, the date must educe of filing.)  ote: If the date inserted in this block does a document's effective date on the Depart	is not meet the applicable statutory filing requirements, this date will not be li-
RTICLE V: Effective date, if other than the an effective date is listed, the date must be date of filing.) ote: If the date inserted in this block does a document's effective date on the Department's effective date on the Department's Other provisions, if any.  REQUIRED SIGNATURE:	A arress a Ca Kisch
ATICLE V: Effective date, if other than the an effective date is listed, the date must date of filing.)  Ote: If the date inserted in this block does document's effective date on the Department's effective date on the Department of the Department	is not meet the applicable statutory filing requirements, this date will not be litteent of State's records.
RTICLE V: Effective date, if other than the fan effective date is listed, the date must e date of filing.)  ote: If the date inserted in this block does to document's effective date on the Depart RTICLE VI: Other provisions, if any.  REOUTRED SIGNATURE:  Signature of this document is I am aware that a constitutes a third	Lawrence of State's records.  List a member or an authorized representative of a member.  Executed in accordance with section 605.0203 (1) (b), Florida Statutes.  The series of State information submitted in a document to the Department of State.

(11)200020125 3/