

06/24/2022 05:14
6/24/22, 4:15 PM

001 004

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.

((H22000218946 3)))



H220002189463ABC1

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 : LICENSES & PERMITS LLC
Account Number : 120210000155
Phone : (305)226-8727
Fax Number : (305)226-8767

****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.
Y MORO LOGISTIC LLC

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

2022 JUN 24 PM 4:53

RECEIVED
DIVISION OF CORPORATIONS
FACIAL

RECEIVED

Electronic Filing Menu

Corporate Filing Menu

Help

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Y MORO LOGISTICS LLC

Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

LUCIA ESTRELLA

Name of Person

LICENSES & PERMITS LLC

Firm/Company

8300 WEST FLAGLER STREET SUITE 114

Address

MIAMI, FLORIDA 33144

City/State and Zip Code

ACRUZ.ACCURATE@GMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

LUCIA ESTRELLA

305

226-8727

at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &
Certificate of Status

☐ \$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$160.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

Mailing Address

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

New Filing Section Division
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

2022 JUN 24 AM 8:14

11:51

DocuSign Envelope ID: 5775AB45-2697-405D-887B-527372851FB9

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**ARTICLE I - Name:**

The name of the Limited Liability Company is:

Y MORO LOGISTICS LLC

(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:4911 SW 95 AVE
MIAMI, FL 33165Mailing Address:4911 SW 95 AVE
MIAMI, FL 33165**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:

YOSBIEL MORALES RODRIGUEZ

Name

4911 SW 95 AVEFlorida street address (P.O. Box NOT acceptable)

<u>MIAMI</u>	<u>FLORIDA</u>	<u>33165</u>
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.

DocuSigned by:

YMR
YOSBIEL MORALES RODRIGUEZ
 Registered Agent's Signature (REQUIRED)

(CONTINUED)

2022 JUN 24 AM 8:14

FILED

DocuSign Envelope ID: 5775AB45-2697-405D-8879-527372E51FB9

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:

"AMBR" = Authorized Member

"MGR" = Manager

Name and Address:

AMBR

YOSBIEL MORALES RODRIGUEZ

4911 SW 95 AVE

MIAMI, FLORIDA 33165

(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 at least 30 days after the date of filing.)

(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:

- DocuSigned by:

AD582C1E304E2

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.

YOSBIEL MORALES RODRIGUEZ

Typed or printed name of signer

Filling Recs:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)