## **Division of Corporations** Electronic Filing Cover Sheet

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(((H22000280360 3)))



H220002803603ABCX

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : THREE K FAST CARRIER SERVICES INC

Account Number : I20180000033 Phone : (305)805-3516 Fax Number : (305)887-5844

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

## FLORIDA LIMITED LIABILITY CO. JD DELIVERY AND LOADING LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$125.00

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Help

# H22000280363

#### COVER LETTER

	New Filing Sect Division of Corp				
edorac	JD Delivery	and Loading LLC			
Jonate	T:	Name of Lim	ited Liabilit	у Сетрапу	
The enclu	sed Articles of C	Organization and fee(s) are	submitted (	for filing.	
Please rea	nirn all correspo	ndence concerning this mal	ter to the fo	Howing:	
	Steven Zamo	Rino			
			Name of		,
	CBS Financia	al CPA PA			
			Firm/Cor		
	6075 W Com	unercial Blvd			
			Addre	:88	
	Tumarac, FL	33319			
			ity/Stute and	i Zip Code	
		nancialepa.com		<del></del>	
	F	E-mail address: (to be used	for future #	nnual report notificati	оп)
For furthe	r information co	ncerning this matter, please	e call:		
	Steven Zamo	rano 95 nt (	4	724-4141	
	Nam	ic of Person A	rea Code	Daytime Telephon	e Number
Enclose	d is a check for t	he following amount:			
圖\$125.	.00 Filing Feo	S130.00 Filing Fee & Certificate of Status	Certifi	5,00 Filing Fee & ed Copy at copy is enclosed)	☐\$160.00 Filing Foc, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address New Filing Section Division of Corporations P.O. Box 6327

Tallahussee, Ff. 32314

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

### ARDCLES OF ORGANIZATION FOR PLORIDA LIMITED LIABILITY COMPANY

JD Delivery and Loadi			
(Must contai	in the words "Limited Li	iability Company, '	"L.L.C.," or "LLC.")
ARTICLE II - Address:			
he mailing address and street add	dress of the principal off	ice of the Limited	Liability Company is:
Principa'	l Office Address:		Matting Address:
16640 SW 62 Street		1664	0 SW 62 Street
Davic, FL 33331  ARTICLE III - Registered Ages The Limited Liability Company of mother business entity with an ac-	nt, Registered Office, & cannot serve as its own F	Registered Agent States	t's Signature: fou must designate an individua
ARTICLE III - Registered Ages The Limited Liability Company of	nt, Registered Office, & cannot serve as its own F ctive Florida registration ddress of the registered :	Registered Agent. Y	t's Signature:
ARTICLE III - Registered Ages The Limited Liability Company of mother business entity with an ac-	nt, Registered Office, & cannot serve as its owa F ctive Florida registration	Registered Agent. Y	t's Signature:
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Having been named as registered agent and to accept service of process for the above stated limited hability 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.

Nan Duate
Registered Agent's Signature (REQUIRED)

(CONTINUED)

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ARTICLE IV-

l'itle:	Name and Address:
'AMBR" = Authorized Membe	IT
MGR" = Manager	
MGRM	Juan P Duarto
	16640 SW 62 Street
	Davie, FL 33331
MGRM	Juana Campos Trejo
	16640 SW 62 Street Davic, FL 33331
	Davic, F1, 33331
<del>_</del>	
CV: Effective date, if other the citive date is listed, the date in filling.)	-
EV: Effective date, if other the citive date is listed, the date in filling.) the date inserted in this block	must he specific and cannot be more than five business days prior to or 90 does not meet the applicable statutory filing requirements, this date will no
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