3052201440 vision of Corporations Electronic Filing Cover Sheet

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	10:	
_		Division of Corporations
: 20	•	Fax Number : (850)617-6381
S PH 4:	From:	Account Name : LAZARUS CORPORATE FILING SERVICE, INC. Account Number : I20000000019 Phone : (305)552-5973 Fax Number : (305)675-5944
(17797	** <u>F</u>	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. ST. PETER TRANSPORTATION LLC

Certificate of Status	1
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMI

ARTICLE I - Name: The name of the Limited Liability Company is:	SEURETA JALLAHAS	2022 DEC 1	<u></u>
ARTICLE Peter Transportation LLC	SEE.	H9 91	<u> </u>
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited I. Company is:	FLORIDA DRIDA iabilit		D
1805 Coral Way Suite 103 Miami El 33155			· · · · · · · · · · · · · · · · · · ·
			
ARTICLE III - Registered Agent, Registered Office: The name and the Florida street address of the registered agent are: (The Law test) Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.) Markus Peter Szaiko	Lability		***************************************
7805 Coral Way Suite 103			
Migni KL 33155			
ARTICLE IV The name and title of each person authorized to manage and control the Limit Liability Company: (MGR or AMBR)	ted		
Peter Sigilso MGR	. 		·
Markus Peter Szajko AMBR			
J	<u> </u>	·	

Required Signatures:

Signature of a member or an authorized representative of a member.

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 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 age: t as provided for in Chapter 605, F.S..

Registered Agent's, Signature (REQUIRED)