

L23000009691

Electronic Filing Cover Sheet

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((H230000098863))



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To:

Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : THREE K FAST CARRIER SERVICES INC
Account Number : 120180000033
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.

Email Address: Elmoravitez1@gmail.com

FLORIDA LIMITED LIABILITY CO. ASPHALT EXPERTS LLC

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

2023 JAN 9 11:10:22

Oct 9, 2023 9:43AM

112 No. 3999 of 78863

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: ASPHALT EXPERTS 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:

First Name: ELMER (2) Last Names: AVILEZ MEJIA
Name of Person

ASPHALT EXPERTS LLC
Firm/Company

30330 SW 161ST ST
Address

HOMESTEAD, FL 33033
City/State and Zip Code

ELMERA VILEZI@GMAIL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ELMER AVILEZ MEJIA at (786) 283-9586
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

Jan. 9. 2023 9:43AM

Handwritten notes: H. X. Avilez Mejia, 3999...

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

ASPHALT EXPERTS 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:

Mailing Address:

30330 SW 161ST ST
HOMESTEAD, FL 33053

30330 SW 161ST ST
HOMESTEAD, FL 33053

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:

ELMER AVILEZ MEJIA

Name

30330 SW 161ST ST

Florida street address (P.O. Box NOT acceptable)

HOMESTEAD FL 33033
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.

Handwritten signature of Elmer Avilez Mejia

Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

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

Title:

Name and Address:

"AMBR" = Authorized Member

"MGR" = Manager

AMBR	ELMER AVILEZ MEJIA 10330 SW 161ST ST HOMESTEAD, FL 33033

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 01-05-2023 (OPTIONAL)

(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:

N/A

REQUIRED SIGNATURE:

X Elmer Avilez Mejia

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.

Elmer Avilez Mejia

Typed or printed name of signer

Filing Fees:

- \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)