L23000013453

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.

(((H23000010717 3)))

H23000010717 3AECV

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 : 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.

Email Address: angelvazquezcapote@gmail.com

FILED
2023 JAN 11 AM 9:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2023 JAN 11 PM 4:48

FLORIDA LIMITED LIABILITY CO.

PACHY TRANSPORT LLC

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

Electronic Filing Menu Corporate Filing Menu Help

Jan. 11. 2023 4:33PM

H23000063173

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: PACHY TRANSPORT 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: ANGEL (2) Last Names: VAZQUEZ CAPOTE
Name of Person

PACHY TRANSPORT LLC
Firm/Company

1097 SW ESTAUGH AVE
Address

PORT ST LUCIE, FL 34953
City/State and Zip Code

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

For further information concerning this matter, please call:

Angel Vazquez Capote at (502) 631-8285
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. 11. 2023 4:39PM

FL No. 6235 P. 3/4

DOC# 23000107173

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:
The name of the Limited Liability Company is:

PACHY TRANSPORT 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:
1097 SW Estaugh Ave
Port St Lucie, FL 34953

Mailing Address:
1097 SW Estaugh Ave
Port St Lucie, FL 34953

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:

Angel Vazquez Capote
Name

1097 SW Estaugh Ave
Florida street address (P.O. Box NOT acceptable)

Port St Lucie, FL 34953
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)

FILED
2023 JAN 11 AM 9:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Jan. 11 2023 4:34PM

M No. 623[illegible]

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	Angel Vazquez Capote 1097 SW ESTAUGH Ave Port St. Lucie, FL 34953

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 01/09/2023 (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:

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.

Angel Vazquez Capote
Typed or printed name of signee

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)