Division of Corporations Iorida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : BUSINESS WORLD TRANSACTIONS, INC.

Account Number : 104512000707 Phone : (305)803-2736 Fax Number : (305)645-1527

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. GUIA & ROJAS TRANSPORTATION, LLC.

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

Electronic Filing Menu

Corporate Filing Menu

Help

HOMESTEAD, FL. 33033

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liability Company is:	
GUIA & ROJAS TRA	ANSPORTATION, LLC.
(Must contain the words "Limited Liab	
ARTICLE II - Address: The mailing address and street address of the principal office	of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
28122 SW 160 COURT	28122 SW 160 COURT

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:

HOMESTEAD, FL. 33033

YASIEL GUIA ROI	DRIGUEZ	
	Name	<u> </u>
28122 SW 160 COU	RT	
Florida street addres	s (P.O. Box <u>NOT</u> a	cceptable)
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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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ARTICLE IV-	
The name and address of each person authorized to manage and control the Limited Liability Con	npany:

Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:		
MGR	YASIEL GUIA RODRIGUEZ 28122 SW 160 COURT HOMESTEAD, FL. 33033		
MGR	YENEL ROJAS GARCIA 28122 SW 160 COURT HOMESTEAD, FL. 33033		
(in an effective pare is usied, the date must be sp	of filing: (OPT ecific and cannot be more than five business days	TONAL) o or 90 days after
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