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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

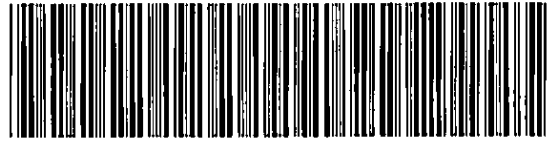
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FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 20, 2022

ANTHONY V MCFARLAND
914 SOUTH MAIN ST
HAVANA, FL 32333 US

SUBJECT: DOLPHIN TRANSPORT & LOGISTICS, LLC
Ref. Number: W22000156395

We have received your document for DOLPHIN TRANSPORT & LOGISTICS, LLC. However, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$125.00. Your document will be retained in our pending file. Please return a copy of this letter to ensure that your check is properly credited.

If you have any further questions concerning your document, please call (850) 245-6052.

KAIN COSTELLO
Regulatory Specialist II
New Filing Section

Letter Number: 522A00028326

If you have any further questions concerning your document, please call (850) 245-6052.

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Regulatory Specialist II
New Filing Section

Letter Number: 522A00028326

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COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: DOLPHIN TRANSPORT & LOGISTICS OF FL, 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:

ANTHONY V. MCFARLAND
Name of Person

DOLPHIN TRANSPORT & LOGISTICS, LLC
Firm/Company

914 SOUTH MAIN STREET
Address

HAWAII, FL 32333
City/State and Zip Code

TONYMAL718@GMAIL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ANTHONY MCFARLAND at (850) 556-8943
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

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

DOLPHIN TRANSPORT & LOGISTICS OF FL, 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:

914 SOUTH MAIN ST, HAVANA, FL
32333

SAME

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:

ANTHONY V. McFARLAND
Name

914 SOUTH MAIN ST
Florida street address (P.O. Box **NOT** acceptable)

HAVANA FL 32333
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 Company:

Title:

Name and Address:

"AMBR" = Authorized Member

"MGR" = Manager

MGR

Anthony V McFarland

(Use attachment if necessary)

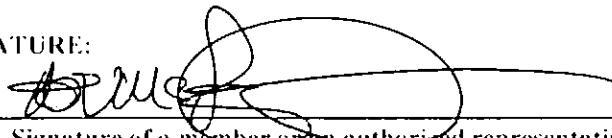
ARTICLE V: Effective date, if other than the date of filing: 2 JAN 2023 (OPTIONAL)

(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.

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.

ANTHONY V. MCFARLAND

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)

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EMAIL RECEIVED FROM EXTERNAL SOURCE

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