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.

(((H23000152001 3)))



H230001520013A8CO

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: Nadinif-galla amail con

COENVED 1PR 24 PM 2: 17 STORATIONS

FLORIDA LIMITED LIABILITY CO. VDG TRUCKING ELC

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

Electronic Filing Menu

Corporate Filing Menu

LAHASSEE, FL

COVER LETTER

	Filing Section sion of Corporations			
oun tror.	VDG TRUCKING LLC			
SUBJECT:	Name of Limited Liability Company			
The enclosed	Articles of Organization and fee(s) are	submitted for filing.		
Please return	all correspondence concerning this mat	er to the following:		
F	irst Name: VLADIMIR (2) Last Nam	es: GOMEZ GONZALEZ	>	
	***************************************	Name of Person	·	
V	DG TRUCKING LEC			
		Firm/Company		
1	5685 SW 82ND CIR LN #215			
**	0 + 	Address		
ħ	ИIЛМI, FL 33193			
_		y/State and Zip Code		
VI 	LADIMIRGG16@GMAIL.COM			
	E-mail address: (to be used t	or future ammal report notification	on)	
For further info	ormation concerning this matter, please	eull:		
V	Tadimir Gomez Conzalez 833			
		a Code Daytime Yelephone	Number	
Enclosed is a	check for the following amount:			
6:4\$ 125,00 F	iling Fee	□\$155.00 Filing Fee & Ccrtified Copy (additional copy is enclosed)	U\$160.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclose → □	
	Mailing Address	Street Address	<u> </u>	

New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

New Filing Section Division The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahussee, FL 32303

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Nam-

The name of the Limited Liability Company is:

Must contain the words "Limited Liability Company, "L.L.C.," or "E.L.C.")

ARTICLE fl - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

15685 SW 82nd CIR LW#215 15685 SW 82nd CIR LW#215 MIGNIFE 33193 MIGNIFE 33193

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;

VIadiMir GOMEZ GONZULEZ
15/085 SW187md Cio In #215

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

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)

2023 APR 24 AM II: 39 SECRETARIC DE STATE

ARTICLE IV-

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

Title; "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	<u>Vladimir Gonez Gonzalez</u> 15685 SW 82nd Cirlw#215
	Miami FL 33193
(Use attachment if necessary)	
e ante of ming.)	be specific and cannot be more than five business days prior to or 90 days after not meet the applicable statutory filing requirements, this date will not be listed a
TICHE VI: Other provisions, if any.	
(.	
REQUIRED SIGNATURE:	
X and the god	
This document is e I am aware that any	a member or an authorized representative of a member. xecuted in accordance with section 605.0203 (1) (b), Florida Statutes. false information submitted in a document to the Department of State egree felony as provided for in s.817.155, F.S.
Vladi	MIR COMEZ GONZAIEZ 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)

MALCHA MINISTRO