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.

(((H23000173372 3)))



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	1.0	~	
		**** 7 1	3	
From:		. ·	2023	
i i Om.		1		
	Account Name : LAZARUS CORPORATE FILING SERVICE, INC.	f = 171.	Z.	
	Account Number : 1200000000019	<u>`</u> ≎> •−+	-<	_ •
		-2		€.≠
	. (202)222-2373	3> 20	တ်	- Teles
	Fax Number : (305)675-5944	in≺	•	J
	·	က်တ	_	45.
			HP	3 3
***	Faton the second of the second	رب ربا	23-	() - Feb.
***	Enter the email address for this business entity to be used for fut	uce	ယ္	6
	annual report mailings. Enter only one email address please.*"		• •	
		E	ω	
	Pendi Address	4 %	0	
	Email Address:			

FLORIDA LIMITED LIABILITY CO. FLORIDA FORWARD LOGISTICS L.L.C.

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

Electronic Filing Menu

Corporate Filing Menu

Help



ARTICLES OF ORGANIZATION	
FOR	
FLORIDA LIMITED LIABILITY COMPAN	J' T .

SCORE	2023	
	II. A	j
TARY OF S	9-1	maser genta
.≺ 29.	TO EK	7
200	دني	<u> </u>
] = [دے	

ARTICLE I - Name:

The name of the Limited Liability Company is:	프롤	30
Florida Forward Rogistica L.L.C.		
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Lial Company is:	bility	
300 w 74 TH PL apt 304		
Highert FL 33014		_
ARTICLE III - Registered Agent, Registered Office: The name and the Florida street address of the registered agent are: (The Limited Liab Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)	vility	
300 w 74 TA PL apt 204		
History FL 33014	······································	
ARTICLE IV The name and title of each person authorized to manage and control the Limited Liability Company: (MGR or AMBR) AMBRICAL Pala Calorales Thanks AMBR		
		

Required Signatures:

Signature of a member or an authorized representative of a member.

In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. 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.

Typed or printed name of signee

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)