

**L23000311436**

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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H230002267853ADC2

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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: BarriosLazaro682@gmail.com

**FLORIDA LIMITED LIABILITY CO.  
BY BROTHERS TRANSPORT LLC**

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

RECEIVED

2023 JUN 29 PM 4:33

REGISTRARS  
CORPORATE  
SERVICES

2023 JUN 29 AM 8:00

LD

H2300 <sup>No. 7306</sup> 785<sup>2</sup>3

TO: ~~S~~New Filing Section  
Division of Corporations

Please return all correspondence concerning this matter to the following:

E-mail address: (to be used for future annual report notification)

LAZARO	at ( 786 )	9302080
Name of Person	Area Code	Daytime Telephone Number

☒ \$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)

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

Jun. 29. 2023 3:52PM

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

No. 7806 P. 3  
FL 50002267853

ARTICLE I - Name:

The name of the Limited Liability Company is:

BY BROTHERS 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:

Mailing Address:

10413 OLD CUTLER RD APT 111  
CUTLER BAY, FL 33190

10413 OLD CUTLER RD APT 111  
CUTLER BAY, FL 33190

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:

LAZARO BARRIOS PEREZ

Name

10413 OLD CUTLER RD APT 111

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

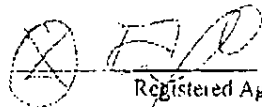
CUTLER BAY FL 33190

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 JUN 29 AM 8:00

LD

Jun. 29. 2023 3:52PM

No. 7386 P. 4

1423000226765 3

**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

LAZARO BARRIOS PEREZ  
10413 OLD CUTLER RD APT 111  
CUTLER BAY, FL 33106

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 06-26-2023 (OPTIONAL)

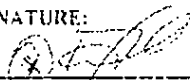
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

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.

ANY AND ALL LAWFUL BUSINESS

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.

LAZARO BARRIOS PEREZ

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)

2023 JUN 23 AM 8:00