

L23000319151
Florida Department of State
Division of Corporations
The Florida 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.

((H230002372313))



H230002372313ABOX

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 : 120180000033
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: Jose.d.74@hotmail.com

FLORIDA LIMITED LIABILITY CO.
JECKA TRANSPORT LLC

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

RECEIVED
2023 JUL -6 PM 1:45
CORPORATIONS
COMMERCIAL
SERVICES

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED
JUL 6 2023 AM 9:07

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: JECKA TRANSPORT 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:

FIRST NAME: JOSE (2) LAST NAME : DANIEL LARGAESPADA
Name of Person

JECKA TRANSPORT LLC
Firm/Company

10250 NW 80TH CT APT #501
Address

MIAMI LAKES, FL 33016
City/State and Zip Code

JOSE.D74@HOTMAIL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JOSE DANIEL LARGAESPADA at (786) 4547802
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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

JECKA 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:

10250 NW 80 CT
APT #501
MIAMI LAKES, FL 33016

10250 NW 80 CT
APT #501
MIAMI LAKES, FL 33016

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:

JOSE DANIEL LARGAESPADA

Name

10250 NW 80 CT APT #501

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

MIAMI LAKES

FL

33016

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)

ARTICLE IV:

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

Name and Address:

AMBR

JOSE DANIEL

LARGAESPADA

10260 NW 80TH CT APT#501

MIAMI LAKES, FL 33016

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 07-06-2023 (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.

JOSE DANIEL LARGAESPADA

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)