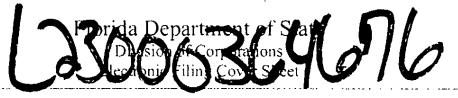
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Division of Corporations



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Fax Number : (850)617-6381

From:

Account Name : HUBCO

Account Number : 104662003400 Phone : (516)935-3940 Fax Number : (516)935-3088

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: WILLIAMSLOGISTICS23@GMAIL.COM

## FLORIDA LIMITED LIABILITY CO.

## **B.** Williams Logistics LLC

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Certificate of Status	1
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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

8	. Williams Lo	gistics LLC
		d Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street addr	ess of the principal	office of the Limited Liability Company is:
Principal Office Address:	<u>Mai</u>	ling Address:
989 Rock Island Place Pensacola, FL 32503		5065 Carmell Ridge Circle Milton, FL 32570
another business entity with an acti  The name and the Florida street add	ve Florida registrati lress of the registere	
<u>Brandon</u>		
	Nan	uc .
	k Island Place	
Florida stre	eet address (P.O. Bo	ox <u>NOT</u> acceptable)
Pensaco	la	FI. 32503
	City	Zip
the place designated in this certi- capacity. I further agree to compl	ficate, I hereby acce by with the provision, with and accept the o	vervice of process for the above stated limited liability company opt the appointment as registered agent and agree to act in this is of all statutes relating to the proper and complete performancy bligations of my position as registered agent as provided for in pter 605, F.S
β	Willed	
Regi		nature (REQUIRED)
	Brandon V	villiams
	(CONTIN	UED)
	Page Loi	ř2

H23000268680

<u>Title:</u>	Name and Address:
"AMBR" = Authorized Men	ber
"MGR" = Manager AMBR	Brandon Williams
AWIDI	
	989 Rock Island Place Pensacola, FL 32503
AMBR	Lakisha Moore
	5065 Carmell Ridge Circle
	Milton, FL 32570
•	
EV: Effective date, if other tective date is listed, the date filling.)	han the date of filing: (OPTIONAL) must be specific and cannot be more than five business days prior to or 9
ctive date is listed, the date filling.)  EVI: Other provisions, it any	han the date of filing: (OPTIONAL) must be specific and cannot be more than five business days prior to or 9
V: Effective date, if other tertive date is listed, the date filling.)  VI: Other provisions, if any	han the date of filing:
EV: Effective date, if other tertive date is listed, the date if filing.) EVI: Other provisions, if any REQUIRED SIGNATURE  Signat  (In accordance we constitutes an a I am aware that	han the date of filing:
EV: Effective date, if other tertive date is listed, the date filling.)  EVI: Other provisions, if any EEQUIRED SIGNATURE  Signat (In accordance we constitutes an a I am aware that	han the date of filing: