11/14/23, 9:56 AM

Division of Corporations



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# FLORIDA LIMITED LIABILITY CO. ALEX CHB TRANSPORTATION LLC

Certificate of Status 0	
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

Corporate Filing Menu Electronic Filing Menu

Help

### ARTICLES OF ORGANIZATION FOR FLORIDALIMITED LIABILITY COMPANY

#### ARTICLE I - Name:

The name of the Limited Liability Company is:

#### ALEX CHB TRANSPORTATION 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:

 605 WOODLAWN DR
 605 WOODLAWN DR

 SEBRING, FL 33870
 SEBRING, FL 33870

#### 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:

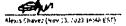
ALEXIS CHAVEZ BECERRA
Name

605 WOODLAWN DR

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

SEBRING FL 33870
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)

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 Page: 4 of 4 , ,	2023-11-14 15.03:20 GMT	13053284774	
ARTICLE IV- The name and address of each	person authorized to manage and contro	al the Limited Lightlity Company	
<u>Title:</u> "AMBR" = Authorized Member "MGR" - Manager	Name and Addres		
AMBR	ALEXIS CHAVEZ BEC 605 WOODLAWN DR SEBRING, FL 33870	ERRA	- -
			- -
			- -
			-
(Use attachment if necessary)	<del></del>		•
ARTICLE V: Effective date, if other the (If an effective date is listed, the date in the date of filing.)  Note: If the date inserted in this block the document's effective date on the December 2.	nust be specific and cannot be more that does not meet the applicable statutory fi	n five business days prior to or 90	-
			2073
		CE A	VCV VCV
REQUIRED SIGNATURE:	re of a member or an authorized repre	sentative of a member.	IL AM
l am aware tha	t is executed in accordance with section it any false information submitted in a de aird degree felony as provided for in s.81	605.0203 (1) (b), Florida Statutes. current of the Department of State	l: 23
<u>ALEXI</u>	S CHAVEZ BECERRA  Typed or printed name of significant controls.	gnee	

From: Yanet Avila

# 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)