

L25000007564

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

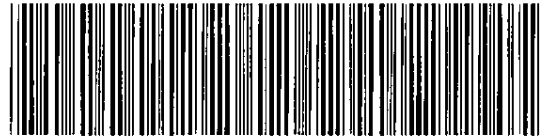
(Document Number)

Certified Copies \_\_\_\_\_

Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



600441343716

12/30/24--01043--023 \*\*55.00

CHATHAM

JAN - 7 2025

RECEIVED  
2024 DEC 30 PM 11:29  
CLERK OF STATE  
TALLAHASSEE, FL

**December 21, 2024**

PRIVATEERS TRANSPORT EXPRESS LLC  
PRINCIPAL ADDRESS: 6520 NW 21ST ST SUNRISE, FL 33313  
MAILING ADDRESS: 10821 SW 152 STREET MIAMI, FL 33157  
EIN: 99-2058192  
DOCUMENT NUMBER: P24000019192

Dear Kain Costello

I am writing to explain why I am filling the Articles of Organization for Florida Limited Liability Company after the company was established on March 13, 2024.

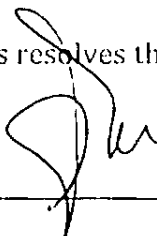
By mistake, the person who opened the company filed under a corporation instead of an LLC.

On August 23, 2024, we filed the Articles of Amendment to FL LLC to add Raysa Comesana as AMBR. The Department then realized the name was approved under the wrong form, so the amendment was denied.

I contacted the Department to correct the error, and they advised me to file Articles of Conversion from a Corporation to an LLC. However, this was also rejected on November 12, 2024. (See letter attached)

Once again, I contacted the Department, and I was advised to file Articles of Organization for Florida Limited Liability Company with a check for \$55, which is the difference from the initial fee paid under a corporation form.

I hope this resolves the mistake and that we finally get it resolved.



---

Alexander Lahera Aguilera

**COVER LETTER**

**TO: New Filing Section  
Division of Corporations**

**SUBJECT:** Privateers Transport Express 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:

NATALIE SPLINTER

Name of Person

NEROS CORP

Firm/Company

12950 SW 127TH AVE APT 303

Address

MIAMI, FL 33186

City/State and Zip Code

OSORIO@NEROSCOP.COM

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

For further information concerning this matter, please call:

NATALIE SPLINTER at (786) 2084438  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- |   |   |   |   |
|---|---|---|---|
| <input checked="" type="checkbox"/> \$125.00 Filing Fee | <input type="checkbox"/> \$130.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$160.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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:

Privateers Transport Express 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:

6520 NW 21st St  
Sunrise, FL 33313

Mailing Address:

10821 SW 152 Street  
Miami, FL 33157

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:

NEROS CORP

Name

12950 SW 127TH AVE APT 303

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

MIAMI

FL

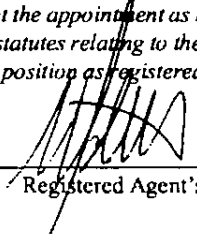
33186

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)

2024 DEC 30 PM 11:29  
SECRETARY OF STATE  
FLA

**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:**

MGR

ALEXANDER LAHERA AGUILERA

10821 SW 152 Street

Miami, FL 33157

AMBR

RAYSA COMESANA

10821 SW 152 Street

Miami, FL 33157

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

DEC 30 PM 11:29  
STATE OF FLORIDA  
DEPARTMENT OF STATE

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)

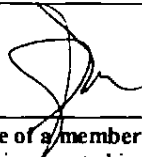
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

**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.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**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.

ALEXANDER LAHERA AGUILERA

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)**