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2314 Wekiva Ridge Road
Apopka, FL 32712

August 16, 1999

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TO: Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32712

FROM:

Winston Ross
Registered Agent

Winston Ross, MBA

4 J Transport Services, L.L.C.

RE:

Name, Address, and Telephone Number

This confirms that I am the Registered Agent for 4 J Transport Services, L.L.C.

My name, mailing address, and phone number are:

Winston Ross

2314 Wekiva Ridge Road
Apopka, FL 32712

(407) 886-2344

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TALLAHASSEE FLORIDA

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If there are any additional information required I may be reached at the above address and/or phone number.

Thank you for expediting this application as soon as possible.

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

4 J TRANSPORT SERVICES, L.L.C.

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

2341 WEKIVA RIDGE ROAD
APOPKA, FL 32712

ARTICLE III - Duration:

The period of duration for the Limited Liability Company shall be:

PERPETUAL

ARTICLE IV - Management:

(Check the appropriate box and complete the statement)

☒ The Limited Liability Company is to be managed by a manager or managers and the name(s) and address(es) of such manager(s) who is/are to serve as manager(s) is/are:

WINSTON ROSS 2341 WEKIVA RIDGE ROAD APOPKA, FL 32712
ESTELCA ROSS 2341 WEKIVA RIDGE ROAD APOPKA, FL 32712
WAYNE ROSS 2341 WEKIVA RIDGE ROAD APOPKA, FL 32712
WENDY ROSS 2341 WEKIVA RIDGE ROAD APOPKA FL 32712

☐ The Limited Liability Company is to be managed by the members and the name(s) and address(es) of the managing member(s) is/are:

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TALLAHASSEE FLORIDA

ARTICLE V - Admission of Additional Members:

The right, if given, of the members to admit additional members and the terms and conditions of the admissions shall be:

NO NEW MEMBERS WILL BE ADMITTED

ARTICLE VI - Members Rights to Continue Business:

The right, if given, of the remaining members of the limited liability company to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the limited liability company shall be:

THE REMAINING MEMBERS WILL CONTINUE TO OPERATE THE BUSINESS BY PAYING FAIR MARKET VALUE FOR THE INTEREST OF THE MEMBER(S).

ARTICLE VII - Affidavit of Membership and Contributions

The undersigned member or authorized representative of a member of _____

4 J TRANSPORT SERVICES, L.L.C. certifies:

- 1) the above named limited liability company has at least one member;
- 2) the total amount of cash contributed by the member(s) is \$ 2000.00;
- 3) if any, the agreed value of property other than cash contributed by member(s) is \$ -0-;
(A description of the property is attached and made a part hereto.); and
- 4) the total amount of cash and property contributed and anticipated to be contributed by member(s) is \$ 2000.00.

Winston Ross, MBA
Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

WINSTON ROSS
Typed or printed name of signer

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TALLAHASSEE FLORIDA

Filing Fee: \$250.00 for Articles and Affidavit

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES,
THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING
STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN
THE STATE OF FLORIDA.

1. The name of the limited liability company is: _____

H J TRANSPORT SERVICES, L.L.C.

2. The name and the Florida street address of the registered agent are:

WINSTON ROSS
NAME

2341 WEKIVA RIDGE ROAD
Florida street address (P. O. Box NOT ACCEPTABLE)

APOPKA, FL 32712
CITY, STATE AND 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.

Winston Ross
SIGNATURE

Filing Fee: \$ 35 for Designation of Registered Agent

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TALLAHASSEE FLORIDA