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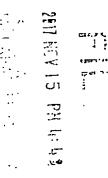
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J. HARRIS

COVER LETTER

Registration Section

TO:

Divisio	on of Corporation	S			
	M& Y TRUCKIN				
SUBJECT	· <u> </u>	Name of	Limited Liability C	Company	
The enclosed "A Existence, and o	Application by For check are submitted	eign Limited Liability Comp d to register the above refere	oany for Authoriza enced foreign limit	tion to Tra ed liability	nsact Business in Florida," Certificate or company to transact business in Floric
Please return al	l correspondence c	oncerning this matter to the	following:		
	JOEL QUINTA	ANA			
		N	ame of Person		
	GM& Y TRUC	KING LLC			
	<u> </u>	F	irm/Company		
	9370 SW 72NE	ST STE A264			
			Address	<u> </u>	
	MIAMI FL 331	.73			
		City/S	tate and Zip Code	<u></u>	
	JAQUINTANAI	4@GMAIL.COM			
		E-mail address: (to be use	d for future annual	report not	ification)
For further info	ormation concernin	g this matter, please call:			
JOEL	, QUINTANA		305	345098	time Telephone Number
	Name o	of Contact Person	Area Code	Day	rtime Telephone Number
Divisi Regist P.O. F	LING ADDRESS: ion of Corporations tration Section Box 6327 nassee, FL 32314			STREET Division Registrat Clifton B 2661 Exe	ADDRESS: of Corporations ion Section
	heck for the follow 25.00 Filing Fee	ring amount: ☐ \$130.00 Filing Fee & Certificate of Status	S155.00 Filin	ng Fee &	☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy



October 26, 2017

JOEL QUINTANA 9370 SW 72ND ST STE A264 MIAMI, FL 33173

SUBJECT: GM&Y TRUCKING, LLC

Ref. Number: W17000085999

We have received your document for GM&Y TRUCKING, LLC and your check(s) totaling \$125.00. However, the document has not been filed and is being retained in this office for the following:

Unfortunately, the enclosed certified copy does not meet our filing requirements. We require a certificate of existence or certificate of good standing, which usually consists of a single sheet of paper that clearly reflects the entity is a valid entity in its home state/country. You can obtain the certificate of existence or certificate of good standing from the same office that provided you with the certified copy.

Please return a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Jenna D Harris Regulatory Specialist II

Letter Number: 117A00021703

www.sunbiz.org

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

	name adopted for the purpose of transacting business	Chaids The alternate and include of include	ad Liabdity Company ""L. L. C." or "L. C.")
	name adopted for the purpose of transacting business	in Florida. The alternate name must include. Limiting $81-275$	2625
TEXAS (Jurisdiction under the law of w	hich foreign limited liability company is organized)	3. <u>そうに</u> てフラー	I number, if applicable)
l	(Date first transacted business in Florida, if pri (See sections 605,0904 & 605,0905, F.S. to do	nor to registration.)	
14000 DELLAIDE DI		etermine penalty hability) 6. 14829 BELLAIRE BL	VD SHITE AT
5. 14829 BELLAIRE BI (Street Address of			g Address)
HOUSTON TX 77083	<u> </u>	HOUSTON TX 77083	<u> </u>
			2 " =
 Name and street addre 	ss of Florida registered agent: (P.O.	Box NOT_acceptable)	
Name:	JOEL A QUINTANA		5
	9370 SW 72ND ST STE A264		
Office Address:	7570 577 72.12 57 57 57 57 57		
		22153	
designated in this applicate to comply with the provis	egistered agent and to accept service ation, I hereby accept the appointme sions of all statutes relative/to the pro	e of process for the above stated lin ent as registered agent and agree to oper and complete performance of	in code) mited liability company at the place o act in this capacity. I further agre
Having been named as r designated in this applica- to comply with the provis	ptance: egistered agent and to accept service ation, I hereby accept the appointme sions of all statutes relative/to the pro as of my position as registered agent.	of process for the above stated ling into as registered agent and agree to oper and complete performance of	in code) mited liability company at the place o act in this capacity. I further agree
Having been named as r designated in this applica to comply with the provis and accept the obligation	ptance: egistered agent and to accept service ation, I hereby accept the appointme sions of all statutes relative/to the pro as of my position as registered agent.	e of process for the above stated lineral as registered agent and agree to oper and complete performance of the control of the	nited liability company at the place of act in this capacity. I further agree from duties, and I am familiar with
Having been named as r designated in this applicate to comply with the provision and accept the obligation 8. The name, title or cap	ptance: egistered agent and to accept service ation, I hereby accept the appointme sions of all statutes relative to the pro as of my position as registered agent. (Registered agent. Dacity and address of the person(s) when the property of the person of	c of process for the above stated line at as registered agent and agree to oper and complete performance of the continuous signature) no has/have authority to manage is/a Title or Capacity: MANAGER	nited liability company at the place of act in this capacity. I further agree my duties, and I am familiar with are: Name and Address: IDALBERTO RODRIGUEZ
Having been named as redesignated in this applicate of comply with the provisand accept the obligation 8. The name, title or capacity:	ptance: egistered agent and to accept service ation, I hereby accept the appointme sions of all statutes relative to the pro- as of my position as registered agent. (Registered agent. pacity and address of the person(s) wh Name and Address: JOEL A QUINTANA 9370 SW 72ND ST STE	c of process for the above stated line at as registered agent and agree to oper and complete performance of the continuous signature) no has/have authority to manage is/a Title or Capacity: MANAGER	nited liability company at the place of act in this capacity. I further agree from duties, and I am familiar with are: Name and Address: IDALBERTO RODRIGUEZ LEYVA 9370 SW 72ND
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Having been named as redesignated in this applicate of comply with the provisand accept the obligation 8. The name, title or capacity: MANAGER (Use attachments if nece	ptance: egistered agent and to accept service ation, I hereby accept the appointme sions of all statutes relative to the pre as of my position as registered agent (Registered ag pacity and address of the person(s) wh Name and Address: JOEL A QUINTANA 9370 SW 72ND ST STE MIAMI FL 33173	c of process for the above stated line at as registered agent and agree to oper and complete performance of c. gent's signature) no has/have authority to manage is/a Title or Capacity: MANAGER A264	nited liability company at the place of act in this capacity. I further agree my duties, and I am familiar with are: Name and Address: IDALBERTO RODRIGUEZ LEYVA 9370 SW 72ND MIAMI FL 33173
Having been named as relesignated in this applicate of comply with the provisuand accept the obligation 8. The name, title or capacity: MANAGER (Use attachments if neces of the translator must be seen the law of the law of the translator must be seen the law of the law of the translator must be seen the law of the law o	ptance: egistered agent and to accept service ation, I hereby accept the appointme sions of all statutes relative to the pro- as of my position as registered agent. (Registered agent. Pame and Address: JOEL A QUINTANA 9370 SW 72ND ST STE MIAMI FL 33173 ssary) e of existence, no more than 90 days of which it is organized. (If the certification)	c of process for the above stated line at as registered agent and agree to oper and complete performance of the co	nited liability company at the place of act in this capacity. I further agree my duties, and I am familiar with are: Name and Address: IDALBERTO RODRIGUEZ LEYVA 9370 SW 72ND MIAMI FL 33173 ial having custody of records in the unslation of the certificate under oath

Typed or printed name of signee

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for GM&Y TRUCKING, LLC (file number 802473401), a Domestic Limited Liability Company (LLC), was filed in this office on May 23, 2016.

It is further certified that the entity status in Texas is in existence.

It is further certified that our records indicate IDALBERTO RODRIGUEZ LEYVA as the designated registered agent for the above named entity and the designated registered office for said entity is as follows:

14829 BELLAIRE BLVD, STE. AT

HOUSTON, TX - 77083 USA

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on November 10, 2017.



Phone: (512) 463-5555



Rolando B. Pablos Secretary of State