## M19000001951

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(Address)
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O SIMMONS FEB 2 6 2019



February 11, 2019

LUIS CAICEDO 1221 BRICKELL AVE, STE 933 MIAMI, FL 33144

SUBJECT: CALOP FREIGHT SERVICES LLC

Ref. Number: W19000013546

We have received your document for CALOP FREIGHT SERVICES LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with 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.

Octavia L Simmons Regulatory Specialist III

Letter Number: 519A00002944

## **COVER LETTER**

TO:		ration Section n of Corporation	ns				
SUBJI		ALOP FREIGHT	SERVICES LLC				
20101			Name o	of Limited Liability	Company		
						ansact Business in Florida," Certificate y company to transact business in Flor	
Please	return all	correspondence of	concerning this matter to t	he following:			
		Luis Fernando	Caicedo				
				Name of Person			
		Calop Freight S	Services LLC				
		· · · · · · · · · · · · · · · · · · ·		Firm/Company			
		1221 Brickell A	venue Suite 933				
			· · · · · · · · · · · · · · · · · · ·	Address			
		Miami ,FL 331-	44				
			City	/State and Zip Code	:	· · · · · · · · · · · · · · · · · · ·	
		legal@efs3pl.cor	n				
			E-mail address: (to be u	sed for future annua	report no	tification)	
For fur	ther infor	mation concernin	g this matter, please call:				
	Luis Fo	ernando Caicedo		786 at (	774692	4	
		Name o	f Contact Person	Area Code	Day	rtime Telephone Number	
	Divisio Registr P.O. Bo	ING ADDRESS: n of Corporations ation Section ox 6327 ssee, FL 32314			Division Registrat Clifton B 2661 Exc	CADDRESS: of Corporations ion Section duilding ecutive Center Circle see, FL 32301	
Enclos		eck for the follow 5.00 Filing Fee	ing amount:  S130.00 Filing Fee & Certificate of Status	S155.00 Filin		☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy	

## 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:

DELAWARE  Ourisdiction under the law of white  01/20/2019  1221 Brickell Ave suite  (Street Address of Pri	(Date first transacted business in Florida, if prior (See sections 605,0904 & 605,0905, F.S. to dete		El number, if applicable)
01/20/2019  1221 Brickell Ave suite (Street Address of Pri	(Date first transacted business in Florida, if prior (See sections 605,0904 & 605,0905, F.S. to dete		El number, if applicable)
1221 Brickell Ave suite (Street Address of Pro		to registration.)	
(Street Address of Pri		to registration.)	
(Street Address of Pri	022	indic penany naminy)	
	953	6 1221 Brickell Avenue	Suite 933
Miami F1 33 13 1	incipal Office)		ng Address)
		Miami Fl 33131	
			<u> </u>
Name and street address	of Florida registered agent: (P.O. B	ox NOT acceptable)	FB 2
Name:	Luis Fernando Caicedo		
Office Address:	1221 Brickell Ave suite 933		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	Miami	, Florida <u>33131</u>	夏丽 古
comply with the provisio	ion, I hereby accept the appointment ons of all statutes relative to the prop	t as registered agent and agree t	
comply with the provisio	ion, I hereby accept the appointmen ons of all statutes relative to the prop of my position as registered agent.	t as registered agent and agree to per and complete performance of	o act in this capacity. I further
comply with the provisional accept the obligations	ion, I hereby accept the appointment ons of all statutes relative to the proposition as registered agent,  (Registered agent)	t as registered agent and agree to ber and complete performance of us signature)	o act in this capacity. I further f my duties, and I am familiar
comply with the provisional accept the obligations	ion, I hereby accept the appointmen ons of all statutes relative to the prop of my position as registered agent.	t as registered agent and agree to ber and complete performance of us signature)	o act in this capacity. I further f my duties, and I am familiar
comply with the provision accept the obligations  The name, title or capac	ion, I hereby accept the appointment ons of all statutes relative to the prop of my position as registered agent.  (Registered agent city and address of the person(s) who	t as registered agent and agree to ber and complete performance of the signature)  has/have authority to manage is/	o act in this capacity. I further f my duties, and I am familiar are: Name and Address:
comply with the provision of accept the obligations  The name, title or capace  Title or Capacity:	ion. I hereby accept the appointment ons of all statutes relative to the prop of my position as registered agent.  (Registered agent city and address of the person(s) who Name and Address:  Luis F. Caicedo  1221_Brickell 1 (33)	t as registered agent and agree to ber and complete performance of the signature)  has/have authority to manage is/  Title or Capacity:	o act in this capacity. I further f my duties, and I am familiar  are:  Name and Address:  Sergio Lopez  1221 Brickett 1 433
comply with the provision and accept the obligations  The name, title or capacity:	ion, I hereby accept the appointment ons of all statutes relative to the proposition as registered agent.  (Registered agent city and address of the person(s) who Name and Address:  Luis F. Caicedo	t as registered agent and agree to ber and complete performance of the signature)  has/have authority to manage is/  Title or Capacity:	o act in this capacity. I further f my duties, and I am familiar are: Name and Address: Sergio Lopez
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comply with the provision of accept the obligations  The name, title or capace  Title or Capacity:  MGR	ion, I hereby accept the appointment ons of all statutes relative to the proposition as registered agent.  (Registered agent in the person of my position as registered agent in the person of my position and person of my position and person of my position as registered agent in the person of my position and person	t as registered agent and agree to ber and complete performance of the signature)  has/have authority to manage is/  Title or Capacity:	o act in this capacity. I further f my duties, and I am familiar  are:  Name and Address:  Sergio Lopez  1221 Brickett 1 433

Typed or printed name of signee

Page 1

## Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "CALOP FREIGHT SERVICES LLC" IS DULY

FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD

STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS

OFFICE SHOW, AS OF THE THIRTIETH DAY OF JANUARY, A.D. 2019.



Authentication: 202062207

Date: 01-30-19