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FLORIDA DEPARTMENT OF STATE Division of Corporations

January 31, 2024

JOSHUA EVANS 15416 DARK STAR LN RUSKIN, FL. 33573 US

SUBJECT: EVANS DISTRIBUTION & LOGISTICS SERVICES LLC

Ref. Number: W24000015945

We have received your document for EVANS DISTRIBUTION & LOGISTICS SERVICES LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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.

Andrea Andrews Regulatory Specialist II

Letter Number: 524A00002062

RECEIVED

FEB 16 2024

COVER LETTER

Registration Section
Division of Corporations

TO:

SUBJECT:	Evans Distribution & Logistics Services L	LLC			
SOBJECT.	Name of Limited Liability Company				
The enclosed Existence, an	d "Application by Foreign Limited Liability and check are submitted to register the above	y Company for Authorization to Transact Business in Florida e referenced foreign limited liability company to transact bus	" Certificate of siness in Florida.		
Please return	all correspondence concerning this matter	to the following:			
	Joshua Evans				
	Name of Person Evans Distribution & Logistics Services LLC Firm/Company				
		Address			
	Ruskin, FL 33573				
City/State and Zip Code					
	evansdistribution23@gmail.com				
	E-mail address: (to b	be used for future annual report notification)	_		
For further i	nformation concerning this matter, please ca	call:			
Ge	orge Evans	813 323-7857 at ()	_		
	Name of Contact Person	Area Code Daytime Telephone Number			
Mailing Address: Registration Section		Street Address: Registration Section			
Division of Corporations		Division of Corporations			
P.O. Box 6327		The Centre of Tallahassee			
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			
Ple	closed is a check for the following amount: ase make check payable to: FLORIDA DE \$125.00 Filing Fee	EPARTMENT OF STATE Fee & = \$155.00 Filing Fee & - \$160.00 Filing Fee			

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: Evans Distribution & Logistics Services LLC (Name of Foreign Limited Liability Company, must include "Limited Liability Company," "L.L.C.," or "LLC.") ED&L Services LLC (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C." or "LLC.") 92-3396352 South Carolina (Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable) (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 31 Laura Dr 31 Laura Dr (Street Address of Principal Office) Scabrook, South Carolina Seabrook, South Carolina 29940 29940 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Joshua Evans Name: 15416 Dark Star Ln

Registered agent's acceptance:

Office Address:

Ruskin

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 application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

, Florida

(Registered agent's signature)

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

Title or Capacity:	Name and Address:	Title or Capacity:	Name and Address:
■Manager	Name: Joshua Evans	■Manager	Name: George Evans
⊓Метher	Address: 15416 Dark Star Ln	[]Member	15416 Dark Star Ln Address:
■Authorized	Ruskin, FL 33573	Authorized	Ruskin, FL 33573
Person	tonge	Person	
□Other	Other	Other	Other
□Manager	Tracy Tucker Name:	■Manager	Name:
■Member	Address:	□Member	Address: 2035 36th St SE
□Authorized	Ruskin, FL 33573	■ Authorized	Ruskin, FL 33570
Person		Person	
□Other	Other	□Other	[]Other
□Manager	Name: Deetra Smalls	∐Manager	Name:
□Member	Address: 2035 36th St SE	□Member	Address:
■Authorized	Ruskin, FL 33570	□Authorized	
Person		Person	
[]Other	Other	□Other	Uther

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

- 9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)
- 10. 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.

Signature of an authorized person

Joshua J. Evans

Trend or printed name of signer

The State of South Carolina



Office of Secretary of State Mark Hammond

Certificate of Existence

I, Mark Hammond, Secretary of State of South Carolina Hereby Certify that:

Evans Distribution & Logistics Services LLC, a limited liability company duly organized under the laws of the State of South Carolina on April 4th, 2023, with a duration that is at will, has as of this date filed all reports due this office, paid all fees, taxes and penalties owed to the State, that the Secretary of State has not mailed notice to the company that it is subject to being dissolved by administrative action pursuant to S.C. Code Ann. §33-44-809, and that the company has not filed articles of termination as of the date hereof.

Given under my Hand and the Great Seal of the State of South Carolina this 5th day of April, 2023.

Mark Hammond, Secretary of State