

UNOFFICIAL COPY



Form **LLC-5.5**

April 2007

Illinois Limited Liability Company Act Articles of Organization

Doc#: 0713544068 Fee: \$26.00
Eugene "Gene" Moore
Cook County Recorder of Deeds
Date: 05/15/2007 12:49 PM Pg: 1 of 2

Secretary of State Jesse White
Department of Business Services
Limited Liability Division
501 S. Second St., Rm. 351
Springfield, IL 62756
217-524-8008
www.cyberdriveillinois.com



LC0931581

This space for use by Secretary of State.

Filing Fee: \$500

Approved: JL

SECRETARY OF STATE

Payment must be made by certified check, cashier's check, Illinois attorney's check, C.P.A.'s check or money order payable to Secretary of State.

1. Limited Liability Company Name: AJJ TRANSPORTATION LLC.

The LLC name must contain the words Limited Liability Company, L.L.C. or LLC and cannot contain the terms Corporation, Corp., Incorporated, Inc., Ltd., Co., Limited Partnership or LP.

2. Address of Principal Place of Business where records of the company will be kept: (P.O. Box alone or c/o is unacceptable.) 3506 W. POTOMAC

CHICAGO, IL 60651

3. Articles of Organization effective on: (check one)

the filing date

a later date (not to exceed 60 days after the filing date): _____

Month, Day, Year

4. Registered Agent's Name and Registered Office Address:

Registered Agent:

VIRGINIA
First Name

Middle Initial

VARQUEZ
Last Name

Registered Office:

2911 N. CICERO AVE
Number Street

STE 200
Suite #

(P.O. Box alone or c/o is unacceptable.)

CHICAGO
City

IL
ZIP Code

60641
County

5. Purpose(s) for which the Limited Liability Company is organized: (If more space is needed, attach additional sheets of this size.)

"The transaction of any or all lawful business for which Limited Liability Companies may be organized under this Act."

6. Latest date, if any, upon which the company is to dissolve: JANUARY 01, 2010
(Leave blank if duration is perpetual.)

Month, Day, Year

UNOFFICIAL COPY

LLC-5.5

7. (OPTIONAL) Other provisions for the regulation of the internal affairs of the Company: (If more space is needed, attach additional sheets of this size.)

8. The Limited Liability Company: (Check either a or b below.)

a. is managed by the manager(s) (List names and business addresses.)

JOSE S. ALVAREZ
3506 W. POTOMAC
CHICAGO, IL 60651

b. has management vested in the member(s) (List names and addresses.)

9. Name and Address of Organizer(s)

I affirm, under penalties of perjury, having authority to sign hereto, that these Articles of Organization are to the best of my knowledge and belief, true, correct and complete.

Dated May 11, 2007
Month & Day Year

1. [Signature]
Signature

JOSE S. ALVAREZ
Name (type or print)

Name if a Corporation or other Entity, and Title of Signer

1. 3506 W. POTOMAC
Number Street

CHICAGO, IL 60651
City/Town

State ZIP Code

2. _____
Signature

Name (type or print)

Name if a Corporation or other Entity, and Title of Signer

2. _____
Number Street

City/Town

State ZIP Code

Signatures must be in black ink on an original document. Carbon copy, photocopy or rubber stamp signatures may only be used on conformed copies.