## LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

## FILED Feb 28, 2002 8:00 am Secretary of State

DOCUMENT # L00000002722  1. Éntity Name TEAMTRANSPORTATION, L.L.C.  DO NOT WRITE IN THIS SPACE			02-28-2002 9004	
			825097	
Suite, Apt. #, etc. Suite, Apt. #, etc.		6087	DO NOT WRITE IN THIS	S SPACE
Panama City, FL	Panama	City, FL	4. FEI Number 59 – 368090 7	Applied For Not Applicable
3a4o	3a406	Country	5. Certificate of Status Desired	<b>\$5.00</b> Additional Fee Required
DO NOT IN THIS S	And the second control of the second control	Street Address (	rick Benneft P.O. Box Number is Not Acceptable) Third Court ma City F	L Zip Code 33240/
8. The above named entity submits this stateme	agent and title if applicable.  Find Make Check Pay	registered office or register EE IS \$50.00 yable to Department o	DATE	
	MBERS/MANAGERS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TOTAL  T	enue FL 32405	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP		
NAME STREET ADDRESS CITY-ST-ZIP  11. I hereby certify that the information supplied	with this filling do	TITLE NAME STREET ADDRESS CITY-ST-ZIP	210 440 07(0V) Florid Community	
	That are ming goes not quality for t	are everibacit stated ill Se	onon moloriogy, monda otatutes, multilet et	army treat tree information

indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE AND THEO OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

1/8/02

(850) 769-668 Daytime Phone #