

L01000015786

Jacksonville Gateway Transportation LLC.

August 28, 2001

100004562071--2
-08/29/01--01046--011
****155.00 ****155.00

To Whom It May Concern:

Re: Limited Liability Corporation

Dear Recipient:

W01-20480

I, Joseph Reed am submitting to you a required cover letter with my name, address and day time telephone number.

Mr. Joseph Reed
4974 Soutel Drive
Jacksonville, Florida 32208
Phone: (904) 765-2544

Limited Liability Corporation

Mailing Address

To: Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314
(850) 245-6051

Street Address

To: Registration Section
Division of Corporations
409 East Gaines Street
Tallahassee, Florida 32399
(805) 245-6051

Very truly yours,

Joseph Reed

By: Joseph Reed

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DIVISION OF CORPORATIONS
01 SEP 14 PM 3:14

W01-20480

Allen Lee Rivers

attached are corrections
from this filing. Would you

Please handle for me

Clarence J. Williams

(312) 443-3287 Phone #

(312) 443-1323 Fax #

Thanks

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01 SEP 14 PM 3:14



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

September 4, 2001

MR. JOSEPH REED
4974 SOUTEL DRIVE
JACKSONVILLE, FL 32208

SUBJECT: JACKSONVILLE GAP TRANSPORTATION LLC
Ref. Number: W01000020480

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We have received your document for JACKSONVILLE GAP TRANSPORTATION 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):

Because this entity is an LLC, not a corporation, your attachment should not refer to it as "corporation." Please correct your attachment so that it does not refer to "corporation."

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) 245-6958.

Lee Rivers
Document Specialist

Letter Number: 501A00049824

ARTICLE I - Name: The name of the Limited Liability Company is: Jacksonville Gap Transportation LLC .

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is: 4974 Soutel Drive, Jacksonville, Florida 32208

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
The name and the Florida street address of the registered agent are:Joseph Reed

Name

4974 Soutel DriveFlorida street address (P.O. Box NOT acceptable)Jacksonville, FL 32208

City, State, and Zip

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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 certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.

Joseph Reed

Registered Agent's Signature

ARTICLE IV - Management (Check box if applicable.)

☐ The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

(An additional article must be added if an effective date is requested)

Joseph J. Peto
Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Joseph Reed

Typed or printed name of signer

Filing Fees:

- / \$100.00 Filing Fee for Article of Organization
- / \$ 25.00 Designation of Registered Agent
- / \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

**LIMITED LIABILITY COMPANY
(ATTACHMENT)**

Article V or (E) according to the State of Florida Article 608.407, Articles of Organization:

"Any other matters that the members elect to include in the articles of organization."

Jacksonville Gap Transportation is a Limited Liability Company. ("LLC") according to 608.407 (Sec. D). "If the Limited Liability Company is to be managed by one or more managers a statement that the company is to be a manger managed company."

INCLUSION

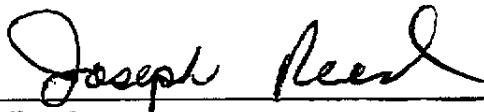
We, as a manager managed company agree that we (the managers) are all equally and fully responsible for the organization "Jacksonville Gap Transportation, LLC" and it's organization of company.

Directive responsibility of company.

Financial obligation, asset, liabilities of company.

Equal ownership and rights to thereof, of company.

Manager:



Joseph Reed

Manager:



David T. Reed

Manager:



Clarence D. Williams

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