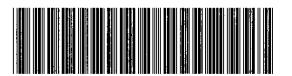
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(Re	questor's Name)	
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

	gistration Section vision of Corporations		
SUBJECT:	Palm Springs Transportation Comp	any, LLC	
Semination.	Name of L	imited Liability Company	-
The enclosed	d Articles of Organization and fee(s)	are submitted for filing.	
Please return	all correspondence concerning this	natter to the following:	
	Marc P. Ganz, Esq.		
-		Name of Person	
1	Nosich & Ganz, Attorneys at Law		
_		Firm/Company	
	75 Valencia Avenue, Suite 1100		
-		Address	
(Coral Gables, FL 33134		
m	ganz@ngattorneys.com	City/State and Zip Code	
	E-mail address: (to be use	d for future annual report notification)	· · · · · · · ·
For further inf	ormation concerning this matter, plea	se call:	
N	Nare P. Ganz	305 442-4800	
-	Name of Person	Area Code Daytime Telephone Number	
Enclosed is a	a check for the following amount:		
\$125.00 Fili	ng Fee \$130.00 Filing Fee & Certificate of Status	(additional copy is enclosed) Certified 6	e of Status &
	Mailing Address New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited	Liability Company is:			
	s Transportation Company, LLC ust end with the words "Limited		"[] C "or"[] C")	_
(1*1	ust the with the words Emilieu	Liaomy company	. L.E.C., Of LEC.)	
ARTICLE II - Address The mailing address and	street address of the principal o	ffice of the Limited	Liability Company is:	
	Principal Office Address:		Mailing Address:	
	da Laon Divid Suita 1201	1600	Ponce de Leon Blvd., Suite1201	
Coral Gables	de Leon Blvd., Suite1201 s, FL 33134		I Gables, FL 33134	<u> </u>
Coral Gables ARTICLE III - Registe (The Limited Liability C	red Agent, Registered Office,	& Registered Agei	1 Gables, FL 33134	
ARTICLE III - Registe (The Limited Liability Canother business entity)	red Agent, Registered Office, ompany cannot serve as its own	& Registered Agent. n.)	1 Gables, FL 33134 ht's Signature:	
ARTICLE III - Registe (The Limited Liability Canother business entity)	red Agent, Registered Office, ompany cannot serve as its own with an active Florida registratio	& Registered Agent. n.)	1 Gables, FL 33134 ht's Signature:	
ARTICLE III - Registe (The Limited Liability Canother business entity)	ered Agent, Registered Office, company cannot serve as its own with an active Florida registration a street address of the registered	& Registered Agent. n.)	1 Gables, FL 33134 ht's Signature:	
ARTICLE III - Registe (The Limited Liability Canother business entity)	ered Agent, Registered Office, company cannot serve as its own with an active Florida registration a street address of the registered	& Registered Agent. Registered Agent. n.) agent are:	1 Gables, FL 33134 ht's Signature:	
ARTICLE III - Registe (The Limited Liability Canother business entity)	ered Agent, Registered Office, company cannot serve as its own with an active Florida registratio a street address of the registered Marc P. Ganz, Esq.	& Registered Agent. Registered Agent. n.) agent are: Name Suite 1100	I Gables, FL 33134 It's Signature: You must designate an individual or	
ARTICLE III - Registe (The Limited Liability Canother business entity)	ered Agent, Registered Office, company cannot serve as its own with an active Florida registratio a street address of the registered Marc P. Ganz, Esq. 75 Valencia Avenue,	& Registered Agent. Registered Agent. n.) agent are: Name Suite 1100	I Gables, FL 33134 It's Signature: You must designate an individual or	

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 605, F.S.

Registered Agent Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

(Use attachment if necessary) E V: Effective date, if other than the date of filing:			Name and Address:
MGR Grant White 1600 Ponce de Leon Blvd., Suite 1201 Coral Gables, FL 33134 MGR Angel Giraldez 1600 Ponce de Leon Blvd., Suite 1201 Coral Gables, FL 33134 (Use attachment if necessary) E V: Effective date, if other than the date of filing:	"MGR" = Mana	horized Member	
MGR Angel Giraldez 1600 Ponce de Leon Blvd., Suite 1201 Coral Gables, FL 33134 Angel Giraldez 1600 Ponce de Leon Blvd., Suite 1201 Coral Gables, FL 33134 (Use attachment if necessary) E V: Effective date, if other than the date of filing:			
Coral Gables, FL 33134 Angel Giraldez 1600 Ponce de Leon Blvd., Suite 1201 Coral Gables, FL 33134 (Use attachment if necessary) E V: Effective date, if other than the date of filing: cortive date is listed, the date must be specific and cannot be more than five business days prof filing.) The date inserted in this block does not meet the applicable statutory filing requirements, this concent's effective date on the Department of State's records. E VI: Other provisions, if any.	MGR		
MGR Angel Giraldez 1600 Ponce de Leon Blvd., Suite 1201 Coral Gables, FL 33134 (Use attachment if necessary) E V: Effective date, if other than the date of filing:			
(Use attachment if necessary) E V: Effective date, if other than the date of filing:			Coral Gables, FL 33134
(Use attachment if necessary) E V: Effective date, if other than the date of filing:		•	·
(Use attachment if necessary) E V: Effective date, if other than the date of filing:	MGR		Angel Giraldez
(Use attachment if necessary) E V: Effective date, if other than the date of filing:			1600 Ponce de Leon Blvd., Suite 1201
(Use attachment if necessary) E V: Effective date, if other than the date of filing:			Coral Gables, FL 33134
(Use attachment if necessary) E V: Effective date, if other than the date of filing:			
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E V: Effective date, if other than the date of filing:			
E VI: Other provisions, if any.	of filing.)	•	
		•	State's records.
REQUIRED SIGNATURE:	E VI: Other prov	visions, if any.	
		IGNATURE: Λ	
	REOUIRED SI	1/10/11	Unuloya
Signature of a member or an aumorized representative of a member	REOUIRED SI	- ANH	Gradey
Lam aware that any falce information submitted in a document to the Denartme	-	Signature of mem	befor an authorized representative of a member.
constitutes a third degree felony as provided for in s.817.155, F.S.	-	This document is executed	in accordance with section 605.0203 (1) (b), Florida Statutes.
Onstitutes a united degree follows as provided for in story riss, viss.	_	This document is executed I am aware that any false in	invaccordance with section 605.0203 (1) (b), Florida Statutes.
	_	This document is executed I am aware that any false in constitutes a third degree fe	il/accordance with section 605.0203 (1) (b), Florida Statutes. Intermation submitted in a document to the Department of State elony as provided for in s.817.155, F.S.
HNGOL GIRALDEZ	_	This document is executed I am aware that any false in constitutes a third degree fe	ilyaccordance with section 605.0203 (1) (b), Florida Statutes. Information submitted in a document to the Department of State elony as provided for in s.817.155, F.S.
HNGEL GIRAL dez	_	This document is executed I am aware that any false in constitutes a third degree fe	ilyaccordance with section 605.0203 (1) (b), Florida Statutes. Information submitted in a document to the Department of State elony as provided for in s.817.155, F.S.
HNGEL GIRAL DEZ Typed or printed name of signee	_	This document is executed I am aware that any false in constitutes a third degree fe	ilyaccordance with section 605.0203 (1) (b), Florida Statutes. Information submitted in a document to the Department of State elony as provided for in s.817.155, F.S.
HNGEL GIRAL dez Typed or printed name of signee Filing Fees:	_	This document is executed I am aware that any false in constitutes a third degree fe	ilyaccordance with section 605.0203 (1) (b), Florida Statutes. Ilyaccordance with section 605

ARTICLE IV-

Page 2 of 2