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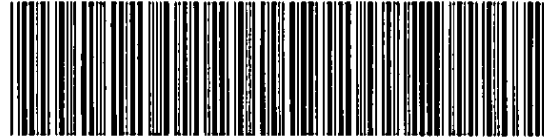
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JAN 18 2019

COVER LETTER

TO: New Filing Section  
Division of Corporations

SUBJECT: New Endeavors Transport LLC  
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Richard Blye Jr  
Name of Person

\_\_\_\_\_  
Firm/Company

1145 Bluegrass Drive  
Address

Groveland, FL 34736  
City/State and Zip Code

rablyejr28@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Siesha Blye at ( 352 ) 255-8386  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- ☐ \$125.00 Filing Fee    ☐ \$130.00 Filing Fee & Certificate of Status    ☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)    ☒ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

**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

**ARTICLE I - Name:**

New Endeavors Transport LLC.

**ARTICLE II - Address:**

**Principal Office Address:**

1145 Bluegrass Drive  
Graveland, AL 34736

**Mailing Address:**

1145 Bluegrass Drive  
Greeland, W 34734

Richard Blye Jr

Name

1145 Bluegrass Drive

Florida street address (P.O. Box **NOT** acceptable)

Graveland fl 34736

City

State

Zip

*Richard A. Blye, Jr.*  
Registered Agent's Signature (REQUIRED)

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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**ARTICLE IV-**

The name and address of each person authorized to manage and control the Limited Liability Company:

**Title:**

"AMBR" = Authorized Member

"MGR" = Manager

AMBR

MGR

**Name and Address:**

Richard Blye Jr  
1145 Bluegrass Drive  
Graveland, AL 34734

Siesha Blye  
1145 Bluegrass Drive  
Graveland, AL 34734

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: 1/1/19 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

**ARTICLE VI:** Other provisions, if any.

**REQUIRED SIGNATURE:**

Richard A. Blye Jr  
Signature of a member or an authorized representative of a member.

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.

Richard A. Blye Jr  
Typed or printed name of signee

**Filing Fees:**

- \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

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FILED  
TALLAHASSEE, FLORIDA  
CLERK OF THE CIRCUIT COURT