Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

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Phone :

: (516) 935-3940

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: takechargenow2012@gmail.com

FLORIDA LIMITED LIABILITY CO.

Elevated Transport LLC

Certificate of Status	1
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Page Count	03
Estimated Charge	\$130.00

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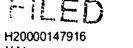
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY CONTRANY OF STATE

TALLAHASSEE, FL

ARTICLE I - Name:

The name of the Limited	Liability Company	is:
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Eleva	ted Transport LLC
(Must end with the wo	ords "Limited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the	ne principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
2116 W St. Louis St	2116 W St. Louis St
Tampa, FL 33607	Tampa, FL 33607
(The Limited Liability Company cannot ser another business entity with an active Flori	•
The name and the Florida street address of	
Andre Sullivan	Name
2116 W St. Lo	
	ess (P.O. Box NOT acceptable)
Tampa	FL 33607
C	ity Zip
the place designated in this certificate, I capacity. I further agree to comply with the	d to accept service of process for the above stated limited liability company at hereby accept the appointment as registered agent and agree to act in this he provisions of all statutes relating to the proper and complete performance accept the obligations of my position as registered agent as provided for in Chapter 605, F.S
_ Alli.	
_	Agent's Signature (REQUIRED)
A	ndre Sullivan
	(CONTINUED)
	Page 1 of 2

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H20000147916

<u>l'itle:</u>	Name and Address:
'AMBR" = Authorized Member	
'MGR" = Manager	Ashley Sullivan
AMBR	
	2116 W St. Louis St
	Tampa, FL 33607

Use attachment if necessary) EV: Effective date, if other than the date	e of filing: (OPTIONAL)
EV: Effective date, if other than the date ctive date is listed, the date must be sp f filing.)	e of filing:
EV: Effective date, if other than the datective date is listed, the date must be sp	e of filing: (OPTIONAL) sectfic and cannot be more than five business days prior to or 90 days a
EV: Effective date, if other than the date ctive date is listed, the date must be sp f filing.)	e of filing: (OPTIONAL) Decific and cannot be more than five business days prior to or 90 days as
E V: Effective date, if other than the date ctive date is listed, the date must be sp f filing.) E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a m	ember or an authorized representative of a member.
E.V: Effective date, if other than the date ctive date is listed, the date must be sp f filing.) E.VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a m	ember or an authorized representative of a member.
EV: Effective date, if other than the date crive date is listed, the date must be sp filing.) EVI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a m	ember or an authorized representative of a member. 605.0203 (1) (b), Florida Statutes, the execution of this document
EV: Effective date, if other than the date crive date is listed, the date must be sp filing.) EVI: Other provisions, if any. Signature of a m (In accordance with section constitutes an affirmation I am aware that any false i	ember or an authorized representative of a member. 605.0203 (1) (b), Florida Statutes, the execution of this document
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