Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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| | Division of Corporations | \widetilde{i} |
| | Fax Number : (850)617-6381 | |
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| rom: | | H S |
| | Account Name : LAZARUS CORPORATE FILING SERVICE, INC. | · · · N |
| | Account Number : I20000000019 | *** |
| | Phone : (305)552-5973 | === ≌ |
| | Fax Number : (305)675-5944 | ••• |

FLORIDA LIMITED LIABILITY CO. TRANSPORT EME LLC

| Certificate of Status | 1 |
|-----------------------|----------|
| Certified Copy | 0 |
| Page Count | 03 |
| Estimated Charge | \$130.00 |

Electronic Filing Menu

Email Address:

Corporate Filing Menu

Help

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| FLORIDATI | FOR | |
|-----------------------------------|----------------------|-------------|
| - ZORIDA L | FOR IMITED LIABIL | ITY COMPANY |
| | | COMPANY |
| The name of the Limited Liability | Company is: | |
| | 1 | |

| Transport EME LLC | |
|--|-------------|
| ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is: | |
| 7850 Osprey cove plunit 102 hisimones | ָ ה ב |
| ARTICLE III - Registered Agent, Registered Office: The name and the Florida street address of the registered agent are: (The Limited Liability with an active Florida registered Agent. You must designate an individual or another business entity | - |
| Jorge (ea) prieto | |
| - 2850 ospret cove p) (mit 100 | |
| ARTICLEIV | |
| The name and title of each person authorized to manage and control the Limited Liability Company: (MGR or AMBR) | |
| Jorge leal Prieto (AMBR) | |
| | |
| | |
| | |

Signature of a member or an authorized representative of a member.

In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. 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.

Typed or printed name of signer

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 695, F.S..

Registered Agent's Signature (REQUIRED)