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COVER LETTER

	tration Section ion of Corporations					
SUBJECT:	Transport Capital,	LLC				
			ited Liability Company)	· 		
Florida," Cer		nd check are su	bility Company for Aut bmitted to register the a			
Please return	all correspondence co	nceming this m	atter to the following:			
	W. Andrew Arnol	d				
(Name of Person)						
W. Andrew Arnold, PC						
		(Fir	m/Company)			
712 E. Washington St.						
			(Address)			
	Greenville	SC	29601			
		(City/Sta	ate and Zip Code)			
For further in	formation concerning	this matter, ple	ase call:			
Trac	cy McKinney		_ # \	-0170	- .	
	(Name of Pe	rson)	(Area Code & Day	time Telephone Numb		
	LING ADDRESS:		STREET ADDRESS	1 * 1	N. T.	
Division of Corporations P.O. Box 6327		Division of Corporation Clifton Building	nis AR	-		
	nassee, FL 32314		2661 Executive Cente Tallahassee, FL 32301	- married	T 岢	
	check for the following 5.00 Filing Fee \$130	ng amount: 0.00 Filing Fee & Certificate of	\$155.00 Filing Fee & Certified Cop	Signal S	Certificate Certified Copy	

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

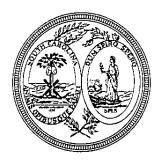
1.	Transport Capital, LLC
	(Name of Foreign Limited Liability Company)
2.	South Carolina 3.
	(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)
4.	March 21, 2006 _{5,} perpetual
	(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")
6.	Business has not yet transacted business in FL (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
7.	418 Scuffletown Rd.
	Simpsonville SC 29681
	(Street Address of Principal Office)
8.	If limited liability company is a manager-managed company, check here
a.	The name and varial hydrogen addresses of the managing members or managers are as fallows:
7.	The name and usual business addresses of the managing members or managers are as follows:
	Jeffery McKinney 418 Scuffletown Rd. Simpsonville, SC 29681
	Tracy McKinney 418 Scuffletown Simpsonville, SC 29681
	Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in
	e jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a relation of the certificate under oath of the translator must be submitted.)
ua	ESMECT OF the Certificate trace Cognitor the translation fraction of the Committee.
1 1	. Nature of business or purposes to be conducted or promoted in Florida: Vehicle Leasing
	ZOON ZEC
	ALLA ARETY ARETY
	Signature of a member or an authorized representative of a member 2
	(In accordance with section 608.408(3), F.S., the execution of this document constitutes (7)
	Jeffery McKinney
	an affirmation under the penalties of perjury that the facts stated herein are true.) Jeffery McKinney Typed or printed name of signee
	Typed of printed name of signed

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

Transport (the Limited Liability Co Capital, LLC Id the Florida street addre			nt and office are:			_
2. 1110 IIII110 III		4 00 C					
	Francisco Nowlin		(Name)				
	6301 E. Hillsbord		h Ave. Tess (P.O. Box <u>NOT</u> AC	CEDTADI E			
	Piolida Sueet	Auu	ess (1.0. box <u>nor</u> ac	CEPTABLE)			
	Tampa		ras FLossoper	3361.0 _m			
			FLC City/State/Zip	100 (100) 100 (100)			
liability compan agent and agree relating to the p	med as registered agent a y at the place designated to act in this capacity. I j roper and complete perfoi y position as registered a	in th furth rmai	nis certificate, I herel ner agree to comply wince of my duties, and	by accept the appoi with the provisions I I am familiar with	intment of of all sto n and acc la Statute	as regi: atutes cept thi es.	stered e
7	y position as registered as aucused Now G (Signature)	<u>[]</u>	······································	· .	SECRETARY OF STATE TALLAHASSEE, FLORIDA	2005 MAY 19 P 1:	
	\$ 100 \$ 25 \$ 30 \$ 5	.00 .00	Designation of R	egistered Agent ptional)		19	

The State of South Carolina



Office of Secretary of State Mark Hammond

Certificate of Existence

I, Mark Hammond, Secretary of State of South Carolina Hereby certify that:

TRANSPORT CAPITAL, LLC, A Limited Liability Company duly organized under the laws of the State of South Carolina on March 21st, 2006, with a duration that is at will, has as of this date filed all reports due this office, paid all fees, taxes and penalties owed to the Secretary of State, that the Secretary of State has not mailed notice to the company that it is subject to being dissolved by administrative action pursuant to section 33-44-809 of the South Carolina Code, and that the company has not filed articles of termination as of the date hereof.

Given under my Hand and the Great Seal of the State of South Carolina this 18th day of April, 2006.

Mark Hammond, Secretary of State