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EXAMINER

DIVISION OF CORPORATIONS

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COVER LETTER

TO:	Registration Section Division of Corporations					<i>*</i>		
SUBJECT: Hu		Humble Tra	mble Transfer, LLC			A OCA		
S-2-2-2-1			me of Limited Liability Company					
Existe	closed "Application by Foreign ace, and check are submitted to	register the above refer	renced foreig	thorization to Ti in limited liabili	ansact Business in Florida," (Certifica		
Please return all correspondence concerning this matter to the following:								
	Mark A. Nagle							
Name of Person								
Humble Transfer, LLC								
		Fi	rm/Company	<i>!</i>				
		18 Ced	dar Tree T	race				
	Address							
Ocala, FL 34472								
City/State and Zip Code								
marknagle2264@hotmail.com								
E-mail address: (to be used for future annual report notification)								
For further information concerning this matter, please call:								
	Mark A.	Nagle	at (35	52 ₎	680-9680			
	Name of Po			ytime Telephon	e Number			
	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314	Divisio Registr Clifton 2661 E	et ADDRE: n of Corpore ation Section Building xecutive Cer assee, FL 323	ntions n nter Circle				
Enclosed is a check for the following amount:								
	▼ \$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status		0 Filing Fee & Certified Copy	\$160.00 Filing Fee, Cer of Status & Certific			

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

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: **Humble Transfer, LLC** (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C," "LLC.") Nevada 27-0833079 (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) 08/26/2009 08/25/2010 (Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual") This is a new business. I have not transacted any business. (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) 7. 18 Cedar Tree Trace Ocala, FL 34472 (Street Address of Principal Office) 8. If limited liability company is a manager-managed company, check here 🗸 9. The name and usual business addresses of the managing members or managers are as follows: Manager - Mark Alan Nagle 18 Cedar Tree Trace; Ocala, FL 34472 10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.) 11. Nature of business or purposes to be conducted or promoted in Florida: A trucking company to haul freight across all 48 contiguous states. Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.) Mark A. Nagle

Typed or printed name of signee

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.

1. The name of the Limited Liability Company is:							
Humble Transfer, LLC							
If unavailable, the alternate to be used in the state of Florida is:							
. The name and the Florida street address of the registered agent and office are:							
Mark Alan Nagle							
(Name)							
18 Cedar Tree Trace							
Florida Street Address (P.O. Box NOT ACCEPTABLE)							
Ocala,FL \$4472							
City/State/Zip							
laving been named as registered agent and to accept service of process for the above stated lim ability company at the place designated in this certificate, I hereby accept the appointment as r							

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 608, Florida Statutes.

(Signature)

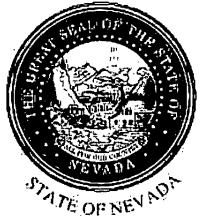
\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

SECRETARY OF STATE



CERTIFICATE OF EXISTENCE (INCLUDING AMENDMENTS)

I, ROSS MILLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **HUMBLE TRANSFER**, **LLC**, as a limited liability company duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since August 26, 2009, and is in good standing in this state.

I further certify, that the above limited liability company has Articles of Organization and no amendments on file in this office as of the date of this certificate.

SENT OF THE

Electronic Certificate
Certificate Number: C20091001-0267
You may verify this electronic certificate
online at http://www.nvsos.gov/

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on October 1, 2009.

ROSS MILLER Secretary of State

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