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## CT Corporation

515 East Park Avenue Tallahassee, FL 32301 850 558 1930 tel 855 637 1628 fax www.ctcorporation.com

September 24, 2015

Department of State, Florida Clifton Building 2611 Executive Center Circle Tallahassee FL 32301

Re:

Order #: 9706252 SO

Customer Reference 1:

TRANSDEV BUS ON DEMAND, L

Customer Reference 2:

Dear Department of State, Florida:

Please obtain the following:

Transdev Bus On Demand, LLC (DE) Registration Florida

Enclosed please find a check for the requisite fees. Please return document(s) to the attention of the undersigned.

If for any reason the enclosed cannot be processed upon receipt, please contact the undersigned immediately at  $(850)\ 222-1092$ .

Thank you very much for your help.

Sincerely,

Connie R Bryan Senior Fulfillment Specialist Connie.Bryan@wolterskluwer.com

#### COVER LETTER

	istration Section islon-of-Corporation	s						
SUBJECT:	TRANSDEV BUS (	ON DEMAND, LLC						
		Name of L	Limited Liability C	Company				
The enclosed Existence, an	l "Application by Ford ad check are submitted	eign Limited Liability Comp I to register the above refere	any for Authoriza need foreign limit	tion to Tra ed liability	nsact Business in Florida," C company to transact busine	Certificate of ss in Florida		
Please return	all correspondence c	oncerning this matter to the	following:					
	General Counse	sl .						
		Na	ime of Person					
	Transdev North	America, Inc.						
Firm/Company								
	720 E. Butterfield Road, Suite 300							
			Address			•		
	Lombard, JL 60	0148						
		City/St	ate and Zip Code					
	beverly.wedin@t	ransdev.com						
		E-mail address: (to be used	for future annual	report not	ification)			
For further in	formation concerning	this matter, please call:						
Веч	erly K. Wedin		630 at (	382-109	90			
	Name of	Contact Person	Area Code	Day	time Telephone Number			
Divi Reg P.O.	ILING ADDRESS: ision of Corporations istration Section Box 6327 ahassee, FL 32314			Division of Registrati Clifton B 2661 Exe	ADDRESS: on Corporations on Section uilding cutive Center Circle ce, FL 32301			
	check for the followi 125.00 Filing Fee	ng amount: ☐ \$130.00 Filing Fee & Certificate of Status	□ \$155.00 Filin Certified Copy	g Fee &	☐ \$160.00 Filing Fee, Cer of Status & Certified Copy			

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

	TION 605,0902, FLORIDA STATUTES, THE FO ISINESS IN THE STATE OF FLORIDA:	OLLOWING IS SUBMITTED	TO REGISTER A FC	REIGN LIMITED	LIABILITY	
, TRANSDEV BUS ON						
	ign Limited Liability Company; must includ	le "Limited Liability Compa	ny," "L.L.C.," or "L	LC.")	•	
Liability Company," "L.L.C,"	ternate name adopted for the purpose of tran or "LLC.")	sacting business in Florida.	The alternate name	must include "Lim	iited	
2. Delaware	3.	TBD				
(Jurisdiction under the law company is organized)	of which foreign limited liability	(FEI num	ber, if applicable)	———		
4. Upon registration						
	(Date first transacted business in Flo (See sections 605.0904 & 605.0905, F	orida, if prior to registration. '.S. to determine penalty liab	.) pility)			
5. 720 E. Butterfield Roa	·		<u></u>			
Lombard, IL 60148						
anma	(Street Address of Principal	l Office)				
6. <u>same</u>				Fo	20	
					15 SE	nijem,
	(Mailing Address	)		美色	1 m	Carrento de
7. Name and street addres	s of Florida registered agent: (P.O. Box	NOT acceptable)		1.58 1.58	2	क्रियोध आ
Name:	C T Corporation System	A THE	- ansa	arquei.		
Office Address:	1200 South Pine Island Road				三	(M) 4
	Plantation	, Florida	33324		<del></del> ,	•
	(City)		(Zip code)		ω	
designated in this applica- to complywith the provision accept the obligations of t	tance: gistered agent and to accept service of p tion, I hereby accept the appointment a tions of all statutes relative to the proper my position as registered agent.  C T Corporation System By:	is registered agent and a	gree to act in this	capacity. I furth and I am familia len	er agrec	
	(Registered ago	ent's signature)				
8. The name, title or capa	ncity and address of the person(s) who ha	as/have authority to mana	ige is/are:			
	14500 N. Northsight Boulevard, Suite 3					
Jan Horstmann, Manager,	720 E. Butterfield Road, Suite 300, Lo	mbard, IL 60148				
Thomas C. LaVoy, Manag	ger, 14500 N. Northsight Boulevard, Su	ite 329, Scottsdale, AZ 8	35260			
	- Marie Company	nte is in a foreign language				
	Signature of an a	•				
This document is executed submitted in a document to	I in accordance with section 605.0203 (1 to the Department of State constitutes a th	l) (b), Florida Statutes. I a nird degree felony as prov	om aware that any rided for in s.817.1	false information 55, F.S.		
	R. Brian Wier					

Typed or printed name of signee

Page 1

# Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "TRANSDEV BUS ON DEMAND, LLC" IS DULY

FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD

STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS

OFFICE SHOW, AS OF THE TWENTY-THIRD DAY OF SEPTEMBER, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

at corp.delaware.gov/authy

Authentication: 10119082

Date: 09-23-15

5830208 8300 SR# 20150242413

You may verify this certificate online at corp.delaware.gov/authver.shtml