

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.

(((H160002440853)))



H160002440853AFIC:

To:	Division of Corporations Fay Number (850) 517-5383		16 SEP			
Fax Number : (850) 617-6383 From: Account Name : C T CORPORATION SYSTEM Account Number : PCA000000023 Phone : (850) 205-8842 Fax Number : (850) 878-5368 **Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.** Email Address: Foreign Limited Liability Company						
	_	• •				
م 10 م	Foreign Limited Liabilit First Transit Rail Services Certificate of Status	• •				
87.58 87.43	First Transit Rail Services Certificate of Status Certified Copy	s of FL, LLC				
7)	First Transit Rail Services Certificate of Status Certified Copy Page Count	0 0 0 0				
7 E	First Transit Rail Services Certificate of Status Certified Copy	s of FL, LLC				
7) E	First Transit Rail Services Certificate of Status Certified Copy Page Count	0 0 0 0	OCT 0 3 2016			

Electronic Filing Menu

Corporate Filing Menu

Help

To: Page 5 of 7

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS

	,IN,FLOR	IDA	
IN COMPLIANCE WITH SEC COMPANY TO TRANSACT BU	TITON 605.0902, FLORIDA STATUTES, THE FOLIA SINESS IN THE STATE OF FLORIDA:	ONING IS SUBMITTED TO REGISTER A FO	REIGN LIMITED LIABILITY.
1. First Transit Rail Servi			
(Name of For	eign Limited Liability Company, must include "L	Imited Liability-Company," "L.L.C.," or "L	CC?")
Liability Company," "L.L.C.	frontate name adopted for the purpose of fransacti	ng business in Florida. The alternate name r	nust include "Limited
2. Delaware	3.		
company is organized)	of which foreign limited liability	(FEI number, if applicable)	The second secon
4. 11/21	(Dute lirst transacted bisiness in Florida	f orier to registration)	
5. 600 Vine Street; Suite	(Dute first transacted business in Florida (See sections 605,0904 & 605,0905, V.S. to 1400	determine penalty liability)	
Cincinnati, OH 45202			- 74
	(Street: Address of Principal Off	ice)	S 50
6. 600 Vine Street, Suite	1400		
Cincinnati, OH 45202			SEP 30
e begreen de de met met som en en mentablikete de en en en	(Mailing Address)		وسير يستر وبهرو
7. Name and street address	ss of Florida registered agent: (P.O. Box NO	OT acceptable)	H
Name:	C T Corporation System	-	9: 36
Office Address:	1200 South Pine Island Road		
	Plantation	.Florida 33324	
Registered agent's accep	(City)	(Zip code)	
Having been named as redesignated in this applicated in this applicate to comply with the provision accept the obligations of t	gistered agent and to accept service of procition, I hereby accept the appointment as regions of all statutes relative to the proper and my position as registered agent. CT Corporation System	gistered agent and agree to act in this complete performance of my dutles, as Kristin Bolden Assistant Secreter signamic)	apacity. I further agree nd I om fomillar with and
	icity and address of the person(s) who has/he 600 Vine Street, Suite 1400, Cincinnati, OH		
James Tippen - CFO; Mic	hael Petrucci- General Counsel, Vice Presid	ent & Secretary 600 Vine Street, Suite	 1400, Cincinnati, OH 4520:
Brian Beechem - Asst Sec	cretary; Christa McAndrew - Asst Secretary	600 Vine Street, Suite 1400, Cincinnati,	OH 45202
9. Attached is a certificate jurisdiction under the law of the translator must be si	of existence, no more than 90 days old, duly of which it is organized. (If the certificate is: abmitted)	authenticated by the official having cus in a foreign language, a translation of th	tody of records in the e certificate under oath
	Signature of an author	Foil mustan	
	~		
This document is executed submitted in a document to	in accordance with section 605,0203 (1) (h) the Department of State constitutes a third d	, Florida Statutes, I am aware that any fa logree felony as provided for in 3.817.15	Ise information 5, F.S.

Typed or printed name of signee

Christa McAndrew

		COVER LETTER			
	tration Section ion of Corporations				
SUBJECT:	First Transit Rail Services of FL, LLC				
	Nau	ne of Limited Liability	Company	-	
The enclosed." Existence, and	Application by Foreign Limited Liability check are submitted to register the above	Company for Authoriza referenced foreign limi	ation to Transact Business in Florida, ted liability company to transact busi	" Certificat ness in Flor	c of rida
Please return a	ll correspondence concerning this matter t	to the following;			
		Name of Person		•	
	CT Corporation				1
	Firm?Company		ं क्र	門に	
	1200 South Pine Island Road			SEP 3	AHASSEE FLORIOR
		Address		30	335
	Plantation, FL 33324				
City/State and Zip Code			g: 36	G	
	brian.beechem@firstgroup.com			5	Ç
	E-mail address: (to b	e used for future annua	report notification)	-	
For fiirther info	rmation concerning this matter, please ca	11:			
		at (Daytime Telephone Number	_	
	Name of Contact Person	Area Code	Daytime Telephone Number		
MAIL	ING ADDRESS: on of Corporations		STREET ADDRESS:		
	ration Section		Division of Corporations Registration Section		

P.O. Box 6327 Tallahassee, FL 32314 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Enclosed is a check for the following amount:

□ \$125.00 Filing Fee

□ \$130.00 Filing Fee &

Certificate of Status

■ \$155.00 Filing Fee &

Certified Copy

☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy

Delaware The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "FIRST TRANSIT RAIL SERVICES OF FL, 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 THIRTIETH DAY OF SEPTEMBER, A.D. 2016.

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

6157795 8300 You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 203088896

Date: 09-30-16