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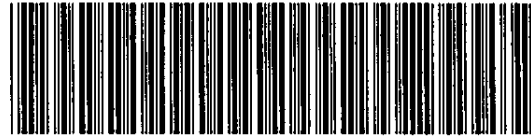
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. SCOTT

MAR 6 2017

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SPEC TRANS LLC
Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida..

Please return all correspondence concerning this matter to the following:

GERALYN DE MAGISTRIS
Name of Person

SPEC TRANS LLC
Firm/Company

4 GERYK Ct
Address

Southampton MA 01073
City/State and Zip Code

racetown1@aol.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Robert De Magistris at (413) 695 0905
Name of Contact Person Area Code Daytime Telephone Number

MAILING ADDRESS:

Division of Corporations
Registration Section
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:

Division of Corporations
Registration Section
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

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17 MAR - 3 AM
TALLAHASSEE, FL 32301
SECRETARY OF STATE

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. SPEC TRAWS LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

SPEC TRAWS 1 LLC

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. MASS.
(Jurisdiction under the law of which foreign limited liability company is organized)

3. 81-4210412
(FEI number, if applicable)

4. _____
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 110 MOSS LN
DAVENPORT FL 33837
(Street Address of Principal Office)

6. 4 GERYK CT
SOUTHAMPTON, MA. 01073
(Mailing Address)

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: ROBERT DEMAGISTRIS

Office Address: 110 MOSS LN
DAVENPORT FL 33837, Florida 33837
(City) (Zip code)

Registered agent's acceptance:

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 application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

[Signature]

(Registered agent's signature)

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

ROBERT DEMAGISTRIS DIST. MANAGER
110 MOSS LN
DAVENPORT FL 33837

9. Attached is a 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. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

[Signature]

Signature of an authorized person

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.

ROBERT DEMAGISTRIS

Typed or printed name of signee

FILED
MAR - 3 1993
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



The Commonwealth of Massachusetts
Secretary of the Commonwealth
State House, Boston, Massachusetts 02133

William Francis Galvin
Secretary of the
Commonwealth

Date: February 24, 2017

To Whom It May Concern :

I hereby certify that a certificate of organization of Limited Liability Company was filed
in this office by

SPEC TRANS LLC

in accordance with the provisions of Massachusetts General Laws, Chapter 156C, on
October 24, 2016.

I further certify that said Limited Liability Company has not filed a Certificate of Cancellation;
that said Limited Liability Company has not been administratively dissolved; and that, so far as
appears of record, said Limited Liability Company has legal existence.



In testimony of which,
I have hereunto affixed the
Great Seal of the Commonwealth
on the date first above written.

William Francis Galvin
Secretary of the Commonwealth

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17 MAR - 3 AM 9:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Certificate Number: 17020418270

Verify this Certificate at: <http://corp.sec.state.ma.us/CorpWeb/Certificates/Verify.aspx>

Processed by: