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To Whom It May Concern:

Please find attached a completed application to register a foreign limited liability company to transact business in Florida. Please also find attached a copy of the business license for Pawar Transportation LLC.

Kind regards,

Amen Pawar-LaRosa  
Pawar Transportation LLC/Spectra Drive App  
VP Marketing/Operations

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** Pawar Transportation 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:

Amen Pawar-LaRosa

\_\_\_\_\_  
Name of Person

Spectra Drive

\_\_\_\_\_  
Firm/Company

111 Blossom Lane #1

\_\_\_\_\_  
Address

Palm Beach Shores, FL 33404

\_\_\_\_\_  
City/State and Zip Code

amen@spectradriveapp.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Amen Pawar-LaRosa

561

312-7726

at (\_\_\_\_\_) \_\_\_\_\_

\_\_\_\_\_  
Name of Contact Person

\_\_\_\_\_  
Area Code

\_\_\_\_\_  
Daytime Telephone Number

**Mailing Address:**

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

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

☐ \$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

**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. Pawar Transportation, 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. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. California 3. 76-0723826  
(Jurisdiction under the law of which foreign limited liability company is organized) (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. 3673 Vista Charonoaks 6. 111 Blossom Lane, #1  
(Street Address of Principal Office) (Mailing Address)  
Walnut Creek Palm Beach Shores  
CA 94598 FL 33404

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

Name: Amen Pawar-LaRosa  
Office Address: 111 Blossom Lane, #1  
Palm Beach Shores, Florida 33404  
(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.*

Amen Pawar-LaRosa

(Registered agent's signature)

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<input type="checkbox"/> Manager	Name: <u>Manvir Pawar</u>	<input checked="" type="checkbox"/> Manager	Name: <u>Amen Pawar-LaRosa</u>
<input type="checkbox"/> Member	Address: <u>3673 Vista Charonoaks</u>	<input type="checkbox"/> Member	Address: <u>111 Blossom Lane #1</u>
<input type="checkbox"/> Authorized	<u>Walnut Creek, CA 94589</u>	<input type="checkbox"/> Authorized	<u>Palm Beach Shores, FL 33404</u>
Person	_____	Person	_____
<input checked="" type="checkbox"/> Other <sup>Owner</sup>	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____
<input type="checkbox"/> Manager	Name: _____	<input type="checkbox"/> Manager	Name: _____
<input type="checkbox"/> Member	Address: _____	<input type="checkbox"/> Member	Address: _____
<input type="checkbox"/> Authorized	_____	<input type="checkbox"/> Authorized	_____
Person	_____	Person	_____
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____
<input type="checkbox"/> Manager	Name: _____	<input type="checkbox"/> Manager	Name: _____
<input type="checkbox"/> Member	Address: _____	<input type="checkbox"/> Member	Address: _____
<input type="checkbox"/> Authorized	_____	<input type="checkbox"/> Authorized	_____
Person	_____	Person	_____
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

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)

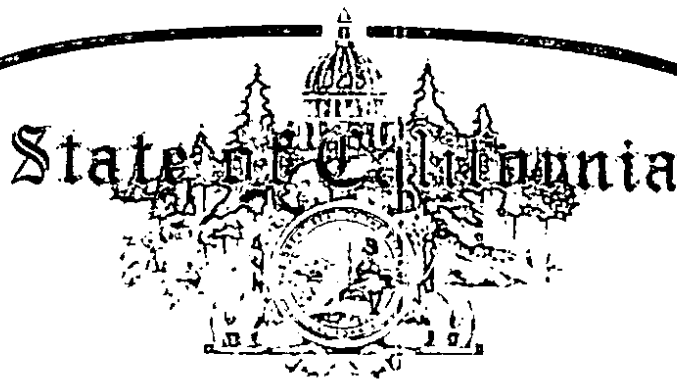
10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Amen Pawar-LaRosa

Signature of an authorized person

Amen Pawar-LaRosa

Typed or printed name of signer



## SECRETARY OF STATE

I, *Kevin Shelley*, Secretary of State of the State of California, hereby certify:

That the attached transcript of . . . page(s) has been compared with the record on file in this office, of which it purports to be a copy, and that it is full, true and correct.

**IN WITNESS WHEREOF**, I execute this certificate and affix the Great Seal of the State of California this day of

JAN 16 2003



*Kevin Shelley*  
Secretary of State



**Secretary of State**  
**Statement of Information**  
(Limited Liability Company)

**LLC-12**

**IMPORTANT** — This form can be filed online at [bizfile.sos.ca.gov](http://bizfile.sos.ca.gov).

Read instructions before completing this form.

**Filing Fee** — \$20.00

**Copy Fees** — First page \$1.00; each attachment page \$0.50;  
Certification Fee — \$5.00 plus copy fees

*Above Space For Office Use Only*

**1. Limited Liability Company Name** (Enter the exact name of the LLC. If you registered in California using an alternate name, see instructions.)

Pawar Transportation LLC

**2. 12-Digit Secretary of State Entity (File) Number**

200301110053

**3. State, Foreign Country or Place of Organization** (only if formed outside of California)

California

**4. Business Addresses**

a. Street Address of Principal Office - Do not list a P.O. Box	City (no abbreviations)	State	Zip Code
3673 Vista Charonoaks	Walnut Creek	CA	94598
b. Mailing Address of LLC, if different than item 4a	City (no abbreviations)	State	Zip Code
c. Street Address of California Office, if item 4a is not in California - Do not list a P.O. Box	City (no abbreviations)	State	Zip Code
3673 Vista Charonoaks	Walnut Creek	CA	94598

**5. Manager(s) or Member(s)**

If no managers have been appointed or elected, provide the name and address of each member. At least one name and address must be listed. If the manager/member is an individual, complete items 5a and 5c (leave item 5b blank). If the manager/member is an entity, complete items 5b and 5c (leave item 5a blank). Note: The LLC cannot serve as its own manager or member. If the LLC has additional managers/members, enter the name(s) and address(es) on Form LLC-12A.

a. First Name, if an individual - Do not complete item 5b	Middle Name	Last Name	Suffix
Manvir	Singh	Pawar	
b. Entity Name - Do not complete item 5a			
c. Address	City (no abbreviations)	State	Zip Code
3673 Vista Charonoaks	Walnut Creek	CA	94598

**6. Service of Process** (Must provide either Individual OR Corporation.)

**INDIVIDUAL** - Complete items 6a and 6b only. Must include agent's full name and California street address.

a. California Agent's First Name (if agent is not a corporation)	Middle Name	Last Name	Suffix
Manvir	Singh	Pawar	
b. Street Address (if agent is not a corporation) - Do not enter a P.O. Box	City (no abbreviations)	State	Zip Code
3673 Vista Charonoaks	Walnut Creek	CA	94598

**CORPORATION** - Complete item 6c only. Only include the name of the registered agent corporation.

c. California Registered Corporate Agent's Name (if agent is a corporation) - Do not complete item 6a or 6b

**7. Type of Business**

Describe the type of business or services of the Limited Liability Company.

Transportation

**8. Chief Executive Officer, if elected or appointed**

a. First Name	Middle Name	Last Name	Suffix
Manvir	Singh	Pawar	
b. Address	City (no abbreviations)	State	Zip Code
3673 Vista Charonoaks	Walnut Creek	CA	94598

**9. The information contained herein, including any attachments made part of this document, is true and correct.**

1-29-19  
Date

Manvir Singh Pawar

Type or Print Name of Person Completing the Form

Member  
Title

Signature

PUBLIC UTILITIES COMMISSION

505 Van Ness Avenue  
San Francisco, CA 94102-3298



CLASS P CHARTER-PARTY PERMIT

EXPIRES ON JULY 20, 2022 - SEE PARAGRAPH (10)

PERMIT NO. TCP0025956 - P  
PAWAR TRANSPORTATION LLC

3673 VISTA CHARONOAKS  
WALNUT CREEK CA 94598

TERMINAL: 3673 VISTA CHARONOAKS WALNUT CREEK CA 94598

The above-named Carrier, having made written application to the Public Utilities Commission of the State of California for a permit to operate as a CHARTER-PARTY CARRIER OF PASSENGERS, pursuant to Sections 5351 through 5420 of the Public Utilities Code, is granted this permit authorizing the transportation of passengers by motor vehicle over the public highways of the State of California as a CHARTER-PARTY CARRIER OF PASSENGERS, as defined in said Code, subject to the following conditions:

- (1) This permit is issued pursuant to Public Utilities Code Section 5384(b), and is limited to the use of vehicles under 15-passenger seating capacity.
- (2) No vehicle or vehicles shall be operated by said Carrier unless adequately covered by a public liability and property damage insurance policy or surety bond as required by Public Utilities Code Section 5392.
- (3) Said Carrier shall comply with all Commission orders, decisions, rules, directions, and requirements governing the operations of said Carrier including General Order Series 115 and 157 and shall remit to the Commission the Transportation Reimbursement Fee required by Public Utilities Code Section 403.
- (4) All vehicles operated under this permit shall comply with the requirements of the Motor Carrier Safety Section of the California Highway Patrol. No vehicle shall be operated unless it is named in the Carrier's most recent equipment list on file with this Commission. Written amendments to the equipment list shall be filed within ten days of the date the vehicle is put into or pulled out of service.
- (5) This permit is subject to amendment, modification, suspension or revocation as provided in the Public Utilities Code and in Commission Resolutions PE-498, PE-501, and TL-18336.
- (6) This permit may not be sold, assigned, leased, or otherwise transferred or encumbered without Commission authorization.
- (7) This permit does not authorize the Carrier to conduct operations on the property of or into any airport unless such operation is authorized by the airport authority involved.
- (8) This permit does not authorize round-trip sightseeing tour service.
- (9) The use of top lights and/or taxi meters in all vehicles operated under this permit is prohibited (D 82-05-069).
- (10) This permit expires July 20, 2022. It may be renewed every three (3) years upon submission and approval of a renewal application. This renewal application should be submitted 90-days prior to the expiration date.

Dated this 24th day of May, 2019

BY *Jeff Kasmar*

Jeff Kasmar  
Program Manager, Consumer Protection and Enforcement Division