DOCU 1. Entity Nam	MENT # M990	00000748		SECRETARY OF STATE DIVISION OF CORPORAVI		
THURNHERR TRANSPORT LLC				SECRETARY OF STATE DIVISION OF CORPORATIO		
				00 MAR - 1 AM 10: 5		
Principal Place of Business Mailing Address			•	30 (mai 1 mi) 10. 3	J	
		5010 NE 7TH ST OCALA FL 34470-1144		AAL		
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2. Principal P	Place of Business	3. Mailing Address				
Suite, Apt. #, etc. Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE			
City & State City & State		City & State		4. FEI Number 31-1537247	Applied For Not Applicable	
Zip Country		Zip	Country		Additional	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent		
THURNHERR, PATRICK M			Name			
5010 NE 7TH ST			Street Address (P.O. Box Number is Not Acceptable)			
OCALA FL 34470						
			City	City FL Zip Code		
	·	Make Check Pa	OW!!! FEE IS \$50. wable to Departmen	nt of State		
9. TITLE	MANAGING MEMI	BERS/MEMBERS	10.	ADDITIONS/CHANGES	se Addition	
NAME STREET ADDRESS CITY-8T-ZIP	THURNHERR, PATRICK M 5010 NE 7TH ST OCALA FL 34470		NAME STREET ADDRESS CITY-ST-ZIP	m/ 2/14/00		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR THURNHERR, DENISE A 5010 NE 7TH ST OCALA FL 34470	□ Deista	TITLE NAME STREET ADDRESS GITY-ST-ZEP	/		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delata	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Chang	je 🗌 Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delatê	TITLE MAME STREET ADDRESS CITY-ST-ZIP	☐ Chang	ge 🗌 Addition	
TITLE NAME STREET ADDRESS CITY-8T-ZIP		☐ Detecto	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Chan;	je 🔲 Addītien	
TITLE MAME STREET ADDRESS CITY-ST-ZIP		□ Delecto	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Chang	ge Addition .	
11. Ifhereby o	I certify that the information supplied will on this report is true and accurate an	th this filing does not qualify fo d that my signature shall have	r the exemption stated i	in Section 119.07(3)(i), Florida Statutes. I further certify that the sift made under-oath; that I am a managing member or manabants (50, Elevida Statutes).	ne information ager of the	