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SECRITARY OF STAFE DIVISION OF CORPORATION

COVER LETTER

Department of State	:		
New Filing Section			
Division of Corpora	tions		
P. O. Box 6327			
Tallahassee, FL 323	314		
SUBJECT:	(PROPOSED CORPORA	WSi-{ inc ate name - <u>must incl</u>	ÜDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the ar	ticles of incorporation and	l a check for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED
FROM:	Tallahass City Aso Daytime	Royale (Printed or typed) Codo We Address See PC 3 State & Zip 669 4925 Telephone number	ste 3 2308

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME The name of the corpora	tion shall be:	Transit inc	<u></u>
ARTICLE II PRINC			ess, if different is:
1737 G	untree Dr.		
Orange 120	WK. FL 3207	·	
ARTICLE III PURPO The purpose for which t	OSE the corporation is organized is:	An legal	
	- · · · · · · · · · · · · · · · · · · ·		7 A 300 A 30
<u> </u>			
ARTICLE IV SHAR. The number of shares of ARTICLE V INITIA		<u> </u>	PH 6: 53
Name and Title	Same Cablera	VILS deat and Title:	
Address		Address:	
	Orange park PL	32073	
Name and Title	·, :	Name and Title:	No. of the control of
Address		Address:	
		•	
Name and Title	:	Name and Title:	
Address			

Name and Title:	Name and Title:
Address	Address:
	
 -	
ARTICLE VI REGISTERED AGENT	
The name and Florida street address (P.O. Box NOT	acceptable) of the registered agent is:
Name: Frank Rons	<u>CPA</u>
Address: 316 Cay 4721	Cinle No Ste 3 - 32368 3
Toulahassee R	<u> 32368 7 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8</u>
	A ARCAN
ARTICLE VII INCORPORATOR	
The name and address of the Incorporator is:	
•	5 E
Address: 1737 GUM	Her Dr.
arange Park,	PL 32073
ARTICLE VIII EFFECTIVE DATE: Effective date, if other than the date of filing: (If an effective date is listed, the date must be specififiling.)	ic and cannot be more than five days prior or 90 days after the
Note: If the date inserted in this block does not meet the document's effective date on the Department of Sta	ne applicable statutory filing requirements, this date will not be listed as te's records.
Having been named as registered agent to accept servi this certificate, I am familiar with and accept the appoi	ice of process for the above stated corporation at the place designated in ntment as registered agent and agree to act in this capacity
Ī,	1. 12
Required Signature/Registere	ed Agent — — — — — — — — — — — — — — — — — — —
	d herein are true. I am aware that the 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.
Jaine a. brera	4/10/17
Required Signature/Incorporator	Date