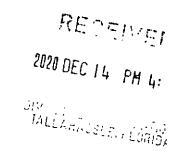
, PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

	PORATION	作品 Ext (2) (2)	Secret	RTMENT OF STATE ary of State		
DOCUMENT # P18000090220  1. Corporation Name						
TRANSPORT AMERICA CORP					'	00356387401
	<del></del> -				12/15	(/2001005102 **900.0f
2. Principal Office Address - No P.O. Box # 4242 NW 2ND ST			3. Mailing Office Address 1 4242 NW 2ND ST		CR2E081 (11/10)	
APT:	1116		Suite. Apt. #, etc. APT: 1116		Date Incorporated or Qualified     To Do Business in Florida 10/30/2018	
City & State	I, FL		City & State MIAMI, FL		5. FEI Number	✓ Applied For Not Applicable
<sup>Zip</sup> 33126	Cou	ntry	33126	Country	6. CERTIFICATE	OF STATUS DESIRED 18.75 Additional Fee required for a Certificate of Status
\$1 <b>-</b>	7.	Name and Address of	Current Registered A	gent	-	7.ECB
Name Name	IIGUEL A	NGEL SAA	VEDRA CH	HINEA		DEC 1
	ress (P.O. Box Nur V 2ND ST	mber is Not Acceptable)				
Suite, Apt. APT: 11	#, Etc.					PH 69:
City MIAMI				FL 33126	55 65	
8. I, being				am familiar with and accept the o	bligations of section	
Signature o Registered	t Agent /a/	Miguel Angi				Date 12/10/2020
			GISTERED AGENT MI	151 SIGN		<del></del>
<b>0</b>	10000		for Director (Florida par		ant I disamon)	
9. Names			Mor Director (Florida noi	nprofit corporations must list at le Street Address of Eacl Officer and/or Directo	h -	C <sub>r</sub> ry / State / Zip
	Of	sses of Each Officer and		Street Address of Each Officer and/or Directo	r r	City / State / Zip
Titles	Of	ses of Each Officer and Name of ficers and/or Directors		Street Address of Each Officer and/or Directo	r r	
Titles	Of	ses of Each Officer and Name of ficers and/or Directors		Street Address of Each Officer and/or Directo	r r	
Titles	Of	ses of Each Officer and Name of ficers and/or Directors		Street Address of Each Officer and/or Directo	r r	
Titles	Of	ses of Each Officer and Name of ficers and/or Directors		Street Address of Each Officer and/or Directo	r r	
Titles	Of	ses of Each Officer and Name of ficers and/or Directors		Street Address of Each Officer and/or Directo	r r	MIAMI, FL 33126
Titles	Of	ses of Each Officer and Name of ficers and/or Directors	A CHINEA 424	Street Address of Each Officer and/or Directors 200 ST A	PT: 1116	MIAMI, FL 33126
P  10. E-ma  11. I certify reinstat owed b	MIGUEL AN  ail Address: that I am an office ement application, y the corporation ha	Name of flicers and/or Directors  GEL SAAVEDR/	A CHINEA 424  Inver or trustee empower on has been eliminated, certify, the information in submitted in a docur	Street Address of Each Officer and/or Director A2 NW 2ND ST A (To be used for future annual reported to execute this application as the corporate name satisfies the indicated on this application is trument to the Department of State of	nt notification)  It provided for in the requirements of see and accurate, and	MIAMI, FL 33126



## 12905 SW 42 STREET Suite: 210 MIAMI, FL 33175 Phone: 305-444-4994

Email: filing@ecfsfiling.com



Office Use Only	

## CORPORATION NAME(S) & DOCUMENT NUMBERS(S):

(CORPORATE NAME)	+ America Corp	CUMENT #)		
2. (CORPORATE NAME)	(DO	(DOCUMENT #)		
3. (CORPORATE NAME)	(DC)	(DOCUMENT #)		
☐ Walk-In X Pio	ck up time: Certified Copy	Certificate Of Status		
New Filings	Amendments  Amendments	Other Filings Annual Report		
New Filings Profit	Amendments	Other Filings		
New Filings Profit Ion-Profit	Amendments Amendments	Other Filings Annual Report		
	Amendments Amendments Resignation Dissolution/Withdrawal Other:	Other Filings Annual Report Fictitious Name		

Examiners Initials	