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FLORIDA PROFIT/NON PROFIT CORPORATION

Sunset Key Trans Holdings Corp

Certificate of Status	0
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eur 2,3 2019

COVER LETTER

Department of State New Filing Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

SUBJECT: Sunset	Key Trans Holdings Corp		
	(PROPOSED CORPORA	ATE NAME - MUST INCL	UDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the ar	ticles of incorporation and	d a check for:
\$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate o Status
		ADDITIONAL CO	PY REQUIRED
FROM:	hard Critchfield Name I East Atlantic Avenue, Suite 201	e (Printed or typed)	
		Address	
Deir	ay Beach, FL 33483		
		State & Zip	
561-	279-0322		
	Daytime T	elephone number	
rhe7	744@aol.com		
	E-mail address: (to be used	for future annual report n	otification)

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 II PRI	NCIPAL OFFICE Principal street address		Mailing address, if different is:	
001 East Atlantic Avenue, Suite 202		1001 Ea	est Atlantic Avenue, Suite 202	
Delray Beach, FL 33	elray Beach, FL 33483		Delray Beach, FL 33483	
ARTICLE III PUR	POSE To provide the corporation is organized is:	the parent of Sun	set Key Transportation Corporation,	
Delray Explorer Hul	493 LLC and Delray Explorer Huli 495 LLC	C		
			5. 6.	
			3	
<u> </u>			2. P2	
			· 3	
RTICLE IV SHA he number of shares	RES 1000 of stock is:		· 5	
he number of shares	of stock is: IAL OFFICERS AND/OR DIRECTORS	····-	Mark Walata Wise D. 12	
he number of shares RTICLE V INIT Name and Ti	of stock is: IAL OFFICERS AND/OR DIRECTORS	Name and Title	Mark Walsh, Vice President	
he number of shares	of stock is: IAL OFFICERS AND/OR DIRECTORS tle: Michael Walsh, Preisdent	Name and Title _ Address:	Mark Walata Wise D. 12	
RTICLE V INIT Name and Ti Address	Michael Walsh, Preisdent 1001 East Atlantic Avenue, Suite 202 Delray Beach, FL 33483		Mark Walsh, Vice President 1001 East Atlantic Avenue, Suite 202 Delray Beach, FL 33483	
he number of shares RTICLE V INIT Name and Ti Address Name and Title	Michael Walsh, Preisdent 1001 East Atlantic Avenue, Suite 202 Delray Beach, FL 33483 William Walsh, Vice President		Mark Walsh, Vice President 1001 East Atlantic Avenue, Suite 202 Delray Beach, FL 33483 Patrick Walsh, Vice President	
RTICLE V INIT Name and Ti Address	Michael Walsh, Preisdent 1001 East Atlantic Avenue, Suite 202 Delray Beach, FL 33483	_ Address:	Mark Walsh, Vice President 1001 East Atlantic Avenue, Suite 202 Delray Beach, FL 33483	
he number of shares RTICLE V INIT Name and Ti Address Name and Title	Michael Walsh, Preisdent 1001 East Atlantic Avenue, Suite 202 Delray Beach, FL 33483 e: William Walsh, Vice President 1001 East Atlantic Avenue, Suite 202	_ Address: _ Name and Title	Mark Walsh, Vice President 1001 East Atlantic Avenue, Suite 202 Delray Beach, FL 33483 Patrick Walsh, Vice President 1000 Market Street, Suite 300	
he number of shares RTICLE V INIT Name and Ti Address Name and Title	Michael Walsh, Preisdent 1001 East Atlantic Avenue, Suite 202 Delray Beach, FL 33483 e: William Walsh, Vice President 1001 East Atlantic Avenue, Suite 202 Delray Beach, FL 33483	_ Address: _ Name and Title	Mark Walsh, Vice President 1001 East Atlantic Avenue, Suite 202 Delray Beach, FL 33483 Patrick Walsh, Vice President 1000 Market Street, Suite 300 Portsmouth, NH 03801	
he number of shares RTICLE V INIT Name and Ti Address Name and Titl Address	Michael Walsh, Preisdent 1001 East Atlantic Avenue, Suite 202 Delray Beach, FL 33483 e: William Walsh, Vice President 1001 East Atlantic Avenue, Suite 202 Delray Beach, FL 33483	_ Address: _ Name and Title: _ Address:	Mark Walsh, Vice President 1001 East Atlantic Avenue, Suite 202 Delray Beach, FL 33483 Patrick Walsh, Vice President 1000 Market Street, Suite 300 Portsmouth, NH 03801	

Name and Title	Robert Garcia, Treasurer	Name and Title:
Address	1000 Market Street, Suite 300	Address:
	Portsmouth, NH 03801	- Addition
(PATIGLE)		
The name and Florida	TERED AGENT street address (P.O. Box NOT acceptable)	e) of the registered agent in
	Corporation System	-y was registered agent is.
Address:	0 South Pine Island Road	
Plan	ntation, FL 33324	
(DELECT - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -		
ARTICLE VII INCO		
The name and address		
Name: M	adonna Cuddihy	
Address:	200 S. Pine Island Road	
P	lantation, FL 33324	
APTICLE LAW COOK		
ARTICLE VIII EFFE Effective date, if other th	an the date of filing:	(OPTION) (C)
(If an offective date is liftling.)	sted, the date must be specific and car	. (OPTIONAL) not be more than five days prior or 90 days after the
Note: If the date inserted	d in this blood done not make the control	
the document's effective	date on the Department of State's record	ole statutory filing requirements, this date will not be listed as s.
Having been named as r	egistered agent to accept service of more	ess for the above stated corporation at the place designated in
	an an one arrest me appointmentally	registered agent and agree to act in this capacity
By:	HOR System 18 k s	i de
	Required Signature/Registered Agent	Assistant Secretary Date
I submit this document a	nd affirm that the facts stated herein a	Total Comments of the Comments
document to the Departm	ent of State constitutes a third degree fet	ony as provided for in £817.155, F.S.
- Wody	in bullily	07/18/2019
Required Sign	ature/Incorporator Madonna Cude	