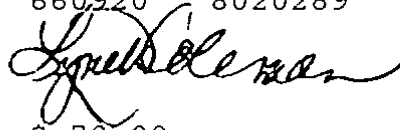


CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 660920 8020289

AUTHORIZATION :



COST LIMIT : \$ 70.00

ORDER DATE : May 5, 2022

ORDER TIME : 1:23 PM

ORDER NO. : 660920-005

CUSTOMER NO: 8020289

DOMESTIC FILING

NAME: GLOBAL TRANSIT AMERICA CORP

EFFECTIVE DATE:

XX ARTICLES OF INCORPORATION
 CERTIFICATE OF LIMITED PARTNERSHIP
 ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Alexxis Weiland - EXT.

EXAMINER'S INITIALS: _____

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

ARTICLE I NAME Global Transit America Corp
The name of the corporation shall be: _____

ARTICLE II PRINCIPAL OFFICE
Principal street address: 1550 Madruga Ave, Ste 303
Coral Gables, FL 33146
Mailing address, if different is: 1550 Madruga Ave, Ste 303
Coral Gables, FL 33146

ARTICLE III PURPOSE
The purpose for which the corporation is organized is: _____
Any and all lawful business under the laws of the State of Florida.

FILED
2022 MAY -5 AM 9:29
SECRETARY OF STATE
TALLAHASSEE, FL

ARTICLE IV SHARES 1,000
The number of shares of stock is: _____

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:	Nicholas Bicchierai - Director	Name and Title:	_____
Address	1550 Madruga Ave., Ste 303 Coral Gables, FL 33146	Address:	_____ _____ _____

Name and Title:	Charanjeet Singh - Director	Name and Title:	_____
Address	1550 Madruga Ave., Ste 303 Coral Gables, FL 33146	Address:	_____ _____ _____

Name and Title:	Navier Ruiz - Secretary	Name and Title:	_____
Address	175 SW 7th Street, Suite 1712 Miami, FL 33130	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: Corporama, Inc. _____
Address: 1550 Madruga Ave, Ste 303 _____
Coral Gables, FL 33146 _____

FILED
2022 MAY -5 AM 9:29
SECRETARY OF STATE
TALLAHASSEE, FL

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Camila Rivero-Fernandez _____
Address: 175 SW 7th Street, Suite 1712 _____
Miami, FL 33130 _____

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Jon Drape
Required Signature/Registered Agent

5/5/2022
Date

I submit this document and affirm that the facts stated 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.

Carla
Required Signature/Incorporator

5/5/2022
Date