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BEFORE THE STATE OF NEVADA TAXICAB AUTHORITY

IN THE MATTER OF THE JOINT APPLICATION OF CERTIFICATE HOLDERS UNION CAB, LLC, ACE CAB, LLC, A NLV CAB, LLC AND VEGAS-WESTERN CAB, LLC (COLLECTIVELY, "SELLER"), AND YCS ACQUISITION, LLC, CAB TRANSPORT, LLC, TAXI TRANSPORT, LLC, AND TWENTY FIRST CENTURY TAXI, LLC (COLLECTIVELY, "BUYER"), FOR APPROVAL OF BUYER'S PURCHASE OF SELLER'S CPCN'S, MEDALLIONS AND TAXI VEHICLES .

DATE OF HEARING: FEBRUARY 28, 2019
TIME OF HEARING: 9:00 AM

SUPPLEMENT TO SELLER AND BUYER'S JOINT APPLICATION

The above-named Seller and Buyer (herein, collectively "Applicants"), have applied to the State of Nevada Taxicab Authority (the "Authority"), pursuant to Nevada Revised Statutes ("NRS") Chapter 706, and Nevada Administrative Code ("NAC") Chapter 706, for approval to allow Buyer's purchase of Seller's CPCN's, Medallions and Taxi Vehicles.

1. Seller is comprised of certificated common motor carriers holding Certificates of Public Convenience and Necessity issued by the Authority pursuant to NRS 706.8827, authorizing them to transport passengers and their baggage in taxicab service between points and places in Clark County, Nevada.
2. The underlying beneficial owners of Buyer are identical to those of Nevada Yellow Cab Corporation, Nevada Checker Cab Corporation, and Nevada Star Cab Corporation ("YCS"). YCS is also comprised of certificated common motor carriers holding Certificates of Public Convenience and Necessity issued by the Authority pursuant to NRS 706.8827, authorizing them to transport passengers and their baggage in taxicab service between points and places in Clark County, Nevada (See schedule of YCS beneficial ownership attached as Exhibit A.)
3. Attached to this Supplement as Exhibit B is a detailed schedule of the underlying beneficial owners and ownership percentages of each of Buyer's four new entities. Although there has been some minor changes in Buyer's four (4) new entities from the underlying beneficial owners of YCS in Exhibit A, these changes are for estate

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planning purposes only; otherwise, the six ownership families and their ownership percentages of YCS and Buyer remain the same.

4. As set forth herein and in the Joint Application, Applicants hereby jointly apply for authority and approval to allow Buyer's purchase of Seller's Assets as set forth in the Joint Application.

5. Attached hereto as Exhibit C is a schedule showing the medallions and CPCNs being sold by Seller to Buyer, broken down by which of Buyer's new entities are receiving which medallions and CPCNs.

6. Attached hereto is Exhibit D, consisting of true and correct copies of the Nevada Secretary of State's acceptance and filing of all organization documents for Buyer's four new entities listed in the Joint Application, this Supplement and Exhibits thereto. As of this date, Buyer's four new entities are legally formed in the State of Nevada, possess the appropriate and necessary authority to commence business operations and acquire Seller's Assets as set forth in the Joint Application and this Supplement thereto.

WHEREFORE, Joint Applicants respectfully request relief as follows:

- 1. Approval of the Joint Application; and
- 2. For such other and further relief as is just and proper.

DATED this 7th day of February 2019.



Marc C. Gordon, Esq.
5225 West Post Road
Las Vegas, Nevada 89118
mgordon@ycstrans.com

Attorney for Joint Applicant Buyer



John H. Mowbray, Esq.
Spencer Fane, LLP
300 S. Fourth Street, Suite 950
Las Vegas, Nevada 89101
JMowbray@spencerfane.com

1 And

2 Jack R. Hanifan, Esq.
3 1575 Delucchi Lane, Suite 115
4 Reno, Nevada 89502
5 jrhanifan@sbcglobal.net

6 **Attorneys for Joint Applicant Seller**

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EXHIBIT A

BUSINESS IDENTITY INFORMATION

- 1 Name of certificate holder and address of office where books are kept:
Nevada Yellow Cab Corporation
5225 W Post Road, Las Vegas, NV 89118
- 2 Certificate number or numbers issued by the Taxicab Authority of Nevada: 439
- 3 Are you operating as a corporation, association, partnership or individual? Corporation
- 4 Date operations began under present ownership: July 18, 1986
- 5 If operating as an individual, name and address of owner: N/A
- 6 If a partnership, name and address of partners: N/A
- 7 If a corporation, list all stockholders, addresses, and percent of stock owned:

NAME	POST OFFICE ADDRESS	% OF STOCK OWNED
Burton Family Trust	5225 W Post Road, Las Vegas, NV 89118	16.667
Howard Dudley	5225 W Post Road, Las Vegas, NV 89118	16.667
Harry Eliades	5225 W Post Road, Las Vegas, NV 89118	16.667
Peter Eliades	5225 W Post Road, Las Vegas, NV 89118	16.667
Milton Schwartz Trust	5225 W Post Road, Las Vegas, NV 89118	16.667
David Willden	5225 W Post Road, Las Vegas, NV 89118	16.667

- 8 If a corporation, list names of officers and addresses of each:

NAME	POST OFFICE ADDRESS
President David Willden	5225 W Post Road, Las Vegas, NV 89118
Vice President Jonathon Schwartz	5225 W Post Road, Las Vegas, NV 89118
Vice President Howard Dudley	5225 W Post Road, Las Vegas, NV 89118
Secretary Harry Eliades	5225 W Post Road, Las Vegas, NV 89118
Treasurer Harry Eliades	5225 W Post Road, Las Vegas, NV 89118
General Counsel Marc Gordon	5225 W Post Road, Las Vegas, NV 89118

- 9 If a corporation list names of directors and addresses of each:

NAME	POST OFFICE ADDRESS
Jonathon Schwartz	5225 W Post Road, Las Vegas, NV 89118
David Willden	5225 W Post Road, Las Vegas, NV 89118
Peter Eliades	5225 W Post Road, Las Vegas, NV 89118
Harry Eliades	5225 W Post Road, Las Vegas, NV 89118
Howard Dudley	5225 W Post Road, Las Vegas, NV 89118
Stacy Burton	5225 W Post Road, Las Vegas, NV 89118

If additional space is needed, please use additional sheets as needed

EXHIBIT A

BUSINESS IDENTITY INFORMATION

1 Name of certificate holder and address of office where books are kept:

Nevada Checker Cab Corporation
5225 W Post Road, Las Vegas, NV 89118

2 Certificate number or numbers issued by the Taxicab Authority of Nevada: 712

3 Are you operating as a corporation, association, partnership or individual? Corporation

4 Date operations began under present ownership: July 13, 1986

5 If operating as an individual, name and address of owner: N/A

6 If a partnership, name and address of partners: N/A

7 If a corporation, list all stockholders, addresses, and percent of stock owned:

NAME	POST OFFICE ADDRESS	% OF STOCK OWNED
Burton Family Trust	5225 W Post Road, Las Vegas, NV 89118	16.667
Howard Dudley	5225 W Post Road, Las Vegas, NV 89118	16.667
Harry Eliades	5225 W Post Road, Las Vegas, NV 89118	16.667
Peter Eliades	5225 W Post Road, Las Vegas, NV 89118	16.667
Milton Schwartz Trust	5225 W Post Road, Las Vegas, NV 89118	16.667
David Willden	5225 W Post Road, Las Vegas, NV 89118	16.667

8 If a corporation, list names of officers and addresses of each:

NAME	POST OFFICE ADDRESS
President David Willden	5225 W Post Road, Las Vegas, NV 89118
Vice President Jonathon Schwartz	5225 W Post Road, Las Vegas, NV 89118
Vice President Howard Dudley	5225 W Post Road, Las Vegas, NV 89118
Secretary Harry Eliades	5225 W Post Road, Las Vegas, NV 89118
Treasurer Harry Eliades	5225 W Post Road, Las Vegas, NV 89118
General Counsel Marc Gordon	5225 W Post Road, Las Vegas, NV 89118

9 If a corporation list names of directors and addresses of each:

NAME	POST OFFICE ADDRESS
Jonathon Schwartz	5225 W Post Road, Las Vegas, NV 89118
David Willden	5225 W Post Road, Las Vegas, NV 89118
Peter Eliades	5225 W Post Road, Las Vegas, NV 89118
Harry Eliades	5225 W Post Road, Las Vegas, NV 89118
Howard Dudley	5225 W Post Road, Las Vegas, NV 89118
Stacy Burton	5225 W Post Road, Las Vegas, NV 89118

If additional space is needed, please use additional sheets as needed

EXHIBIT A

BUSINESS IDENTITY INFORMATION

- 1 Name of certificate holder and address of office where books are kept:
Nevada Star Cab Corporation
5225 W Post Road, Las Vegas, NV 89118
- 2 Certificate number or numbers issued by the Taxicab Authority of Nevada. 399
- 3 Are you operating as a corporation, association, partnership or individual? Corporation
- 4 Date operations began under present ownership: July 18, 1986
- 5 If operating as an individual, name and address of owner. N/A
- 6 If a partnership, name and address of partners: N/A
- 7 If a corporation, list all stockholders, addresses, and percent of stock owned:

NAME	POST OFFICE ADDRESS	% OF STOCK OWNED
Burton Family Trust	5225 W Post Road, Las Vegas, NV 89118	16.667
Howard Dudley	5225 W Post Road, Las Vegas, NV 89118	16.667
Harry Eliades	5225 W Post Road, Las Vegas, NV 89118	16.667
Peter Eliades	5225 W Post Road, Las Vegas, NV 89118	16.667
Milton Schwartz Trust	5225 W Post Road, Las Vegas, NV 89118	16.667
David Willden	5225 W Post Road, Las Vegas, NV 89118	16.667

- 8 If a corporation, list names of officers and addresses of each:

NAME	POST OFFICE ADDRESS
President David Willden	5225 W Post Road, Las Vegas, NV 89118
Vice President Jonathon Schwartz	5225 W Post Road, Las Vegas, NV 89118
Vice President Howard Dudley	5225 W Post Road, Las Vegas, NV 89118
Secretary Harry Eliades	5225 W Post Road, Las Vegas, NV 89118
Treasurer Harry Eliades	5225 W Post Road, Las Vegas, NV 89118
General Counsel Marc Gordon	5225 W Post Road, Las Vegas, NV 89118

- 9 If a corporation list names of directors and addresses of each

NAME	POST OFFICE ADDRESS
Jonathon Schwartz	5225 W Post Road, Las Vegas, NV 89118
David Willden	5225 W Post Road, Las Vegas, NV 89118
Peter Eliades	5225 W Post Road, Las Vegas, NV 89118
Harry Eliades	5225 W Post Road, Las Vegas, NV 89118
Howard Dudley	5225 W Post Road, Las Vegas, NV 89118
Stacy Burton	5225 W Post Road, Las Vegas, NV 89118

If additional space is needed, please use additional sheets as needed.

EXHIBIT B

BUSINESS IDENTITY INFORMATION

1. Name of entity and address of office where books are kept:

YCS Acquisition, LLC

Cab Transport, LLC

Taxi Transport, LLC

Twenty First Century Taxi, LLC

Located at 4001 S. Decatur Blvd. #37-686, Las Vegas, NV 89103.

2. Are you operating as a corporation, association, partnership or individual? Partnership

3. If a partnership, name and address of partners:

NAME	POST OFFICE ADDRESS	% OF STOCK OWNED
James D. & Maritha Burton Revocable Trust	4001 S. Decatur Blvd #37-686, Las Vegas, NV 89103	11.111112
YCS Acquisition – Burton LLC	4001 S. Decatur Blvd #37-686, Las Vegas, NV 89103	5.555556
Dudley 2012 Family Trust	4001 S. Decatur Blvd #37-686 Las Vegas, NV 89103	16.666666
ASTERI, LLC	4001 S. Decatur Blvd #37-686 Las Vegas, NV 89103	16.666666
Eliades Taxi Acquisition, LLC	4001 S. Decatur Blvd #37-686 Las Vegas, NV 89103	16.666666
Milt Enterprises, LLC	4001 S. Decatur Blvd #37-686 Las Vegas, NV 89103	16.666666
The DJW 2010 YCS Retained Annuity Trust	4001 S. Decatur Blvd #37-686 Las Vegas, NV 89103	14.166666
Joel Willden 2010 YCS Trust	4001 S. Decatur Blvd #37-686 Las Vegas, NV 89103	2.4999999

EXHIBIT C

BREAKDOWN OF SELLER'S MEDALLIONS AND CPCN'S BEING TRANSFERRED TO
EACH OF BUYER'S FOUR NEW ENTITIES

Union Cab 238 Medallions (CPC T 530 Sub 2) To: YCS Acquisition, LLC

Ace Cab 248 Medallions (CPC T 438 Sub 2) To: Cab Transport, LLC

A NLV Cab 221 Medallions (CPC T 012 Sub 6) To: Taxi Transport, LLC

Vegas-Western Cab 221 Medallions (CPC T 883 Sub 5) To: Twenty First Century Taxi, LLC

***TOTAL: 928 Medallions**

*Pursuant to the Asset Purchase Agreement between Seller and Buyer, applicants seek approval to immediately transfer to Buyer the maximum number of the Medallions that, when combined with the number of medallions presently owned by Buyer and Buyer's Affiliates, would result in Buyer and Buyer's Affiliates in the aggregate owning not more than 49% of all medallions issued by the TA. The difference between such maximum number of Medallions that can be transferred without causing Buyer to exceed such 49% limitation and the 928 Medallions presently owned by Seller is referred to as the "Excess Medallions." Assuming present allocations of medallions by the TA remain unchanged between now and approval by the TA, the number of Excess Medallions withheld from the immediate transfer by Seller to Buyer would be 12 Medallions. Such Excess Medallions will reduce the 248 Medallions immediately transferred from Ace Cab LLC to Cab Transport, LLC to 236 Medallions. In the event that during 2019 the TA and/or the Nevada Legislature repeals or amends the current Nevada law/regulation that will permit a single owner, associated ownership group, or common members from various ownership groups to own more than 49% of the Las Vegas taxicab medallions, then in such event the TA approves the transfer of the Excess Medallions from Ace Cab LLC to Cab Transport, LLC.

EXHIBIT D

CONFIRMATION OF NEVADA SECRETARY OF STATE FILINGS FOR BUYER'S FOUR NEW ENTITIES, LEGAL FORMATION THEREOF; AUTHORITY FOR BUYER'S FOUR NEW ENTITIES TO COMMENCE BUSINESS OPERATIONS AND ACQUIRE SELLER'S ASSETS AS SET FORTH IN THE JOINT APPLICATION

Attached to this Exhibit D are true and correct copies of the Nevada Secretary of State's acceptance and filing of all organization documents for Buyer's four new entities listed in this Supplement and Exhibits thereto. As of this date, Buyer's four new entities are legally formed in the State of Nevada, and possess the appropriate and necessary authority to commence business operations and acquire Seller's Assets as set forth in the Joint Application.



BARBARA K. CEGAUSKE
 Secretary of State
 202 North Carson Street
 Carson City, Nevada 89701-4201
 (775) 684-5708
 Website: www.nvsos.gov



050106

**Articles of Organization
 Limited-Liability Company**
 (PURSUANT TO NRS CHAPTER 86)

Filed in the office of <i>Barbara K. Cegauske</i> Barbara K. Cegauske Secretary of State State of Nevada	Document Number 20190056182-74 Filing Date and Time 02/06/2019 11:26 AM Entity Number E0055412019-9
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USE BLACK INK ONLY - DO NOT HIGHLIGHT

(This document was filed electronically.)

ABOVE SPACE IS FOR OFFICE USE ONLY

1. Name of Limited-Liability Company: (must contain approved limited-liability company wording; see instructions)	YCS ACQUISITION LLC		Check box if a Series Limited-Liability Company <input type="checkbox"/>	Check box if a Restricted Limited-Liability Company <input type="checkbox"/>
2. Registered Agent for Service of Process: (check only one box)	<input type="checkbox"/> Commercial Registered Agent: Name <input checked="" type="checkbox"/> Noncommercial Registered Agent (name and address below) OR <input type="checkbox"/> Office or Position with Entity (name and address below) MARC C. GORDON Name of Noncommercial Registered Agent OR Name of Title of Office or Other Position with Entity 4001 S. DECATUR BLVD #37 #686 LAS VEGAS Nevada 89103 Street Address City State Zip Code Mailing Address (if different from street address) City Nevada Zip Code			
3. Dissolution Date: (optional)	Latest date upon which the company is to dissolve (if existence is not perpetual):			
4. Management: (required)	Company shall be managed by: <input type="checkbox"/> Manager(s) OR <input checked="" type="checkbox"/> Member(s) (check only one box)			
5. Name and Address of each Manager or Managing Member: (attach additional page if more than 3)	1) JAMES D. & MARITHA BURTON REVOCABLE TRUST Name 4001 S. DECATUR BLVD #37 #686 LAS VEGAS NV 89103 Street Address City State Zip Code 2) YCS ACQUISITION - BURTON LLC Name 4001 S. DECATUR BLVD #37 #686 LAS VEGAS NV 89103 Street Address City State Zip Code 3) DUDLEY 2012 FAMILY TRUST Name 4001 S. DECATUR BLVD #37 #686 LAS VEGAS NV 89103 Street Address City State Zip Code			
6. Name, Address and Signature of Organizer: (attach additional page if more than 1 organizer)	I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is correct and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State. MARC C GORDON <input checked="" type="checkbox"/> MARC C GORDON Name Organizer Signature 4001 S. DECATUR BLVD #37 #686 LAS VEGAS NV 89103 Address City State Zip Code			
7. Certificate of Acceptance of Appointment of Registered Agent:	I hereby accept appointment as Registered Agent for the above named Entity. <input checked="" type="checkbox"/> MARC C. GORDON Authorized Signature of Registered Agent or On Behalf of Registered Agent Entity 2/6/2019 Date			

This form must be accompanied by appropriate fees.

Articles of Organization

CONTINUED

Includes data that is too long to fit in the fields on the NRS 86 Form and all additional managers and organizers

ENTITY NAME:	YCS ACQUISITION LLC
FOREIGN NAME TRANSLATION:	NOT APPLICABLE

REGISTERED AGENT NAME:	MARCC. GORDON
STREET ADDRESS:	4001 S. DECATUR BLVD #37 #686, LAS VEGAS, NV 89103
MAILING ADDRESS:	.. NV

ADDITIONAL MANAGER/MEMBERS
ASTERI, LLC 4001 S. DECATUR BLVD #37 #686 LAS VEGAS, NV 89103
ELIADES TAXI ACQUISITION, LLC 4001 S. DECATUR BLVD #37 #686 LAS VEGAS, NV 89103
MILT ENTERPRISES, LLC 4001 S. DECATUR BLVD #37 #686 LAS VEGAS, NV 89103
THE DJW 2010 YCS RETAINED ANNUITY TRUST 4001 S. DECATUR BLVD #37 #686 LAS VEGAS, NV 89103
JOEL WILLDEN 2010 YCS TRUST 4001 S. DECATUR BLVD #37 #686 LAS VEGAS, NV 89103

SECRETARY OF STATE



LIMITED LIABILITY COMPANY CHARTER

I, Barbara K. Cegavske, the Nevada Secretary of State, do hereby certify that **YCS ACQUISITION LLC** did on February 6, 2019, file in this office the Articles of Organization for a Limited Liability Company, that said Articles of Organization is now on file and of record in the office of the Nevada Secretary of State, and further, that said Articles contain all the provisions required by the laws governing Limited Liability Companies in the State of Nevada.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on February 6, 2019.

Barbara K. Cegavske

Barbara K. Cegavske
Secretary of State

Certified By: Electronic Filing
Certificate Number: C20190206-0859

SECRETARY OF STATE



NEVADA STATE BUSINESS LICENSE

YCS ACQUISITION LLC
Nevada Business Identification # NV20191101894

Expiration Date: February 29, 2020

In accordance with Title 7 of Nevada Revised Statutes, pursuant to proper application duly filed and payment of appropriate prescribed fees, the above named is hereby granted a Nevada State Business License for business activities conducted within the State of Nevada.

Valid until the expiration date listed unless suspended, revoked or cancelled in accordance with the provisions in Nevada Revised Statutes. License is not transferable and is not in lieu of any local business license, permit or registration.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on February 6, 2019

Barbara K. Cegavske

Barbara K. Cegavske
Secretary of State

You may verify this license at www.nvsos.gov under the Nevada Business Search.

License must be cancelled on or before its expiration date if business activity ceases. Failure to do so will result in late fees or penalties which by law cannot be waived.



BARBARA K. CEGAVSKE
 Secretary of State
 202 North Carson Street
 Carson City, Nevada 89701-4201
 (775) 684-5708
 Website: www.nvsos.gov



**Articles of Organization
 Limited-Liability Company**
 (PURSUANT TO NRS CHAPTER 86)

Filed in the office of
Barbara K. Cegavske
 Barbara K. Cegavske
 Secretary of State
 State of Nevada

USE BLACK INK ONLY - DO NOT HIGHLIGHT

(This document was filed

ABOVE SF

1. Name of Limited-Liability Company:
 (must contain approved limited-liability company wording; see instructions)

TAXI TRANSPORT LLC

Check box
 Series Lim
 Liability Cor

2. Registered Agent for Service of Process: (check only one box)

Commercial Registered Agent:

Name

Noncommercial Registered Agent (name and address below)

OR

Office or Position (name and address)

MARC C. GORDON

Name of Noncommercial Registered Agent OR Name of Title of Office or Other Position with

4001 S. DECATUR BLVD #37 #686
 Street Address

LAS VEGAS
 City

Mailing Address (if different from street address) City

3. Dissolution Date: (optional)

Latest date upon which the company is to dissolve (if existence is not perpetual):

4. Management: (required)

Company shall be managed by:

Manager(s)

OR

(check only one box)

Member

5. Name and Address of each Manager or Managing Member: (attach additional page if more than 3)

1) JAMES D. & MARITHA BURTON REVOCABLE TRUST
 Name

4001 S. DECATUR BLVD #37 #686
 Street Address

LAS VEGAS
 City

2) JAMIE D. BURTON BENEFICIARY TRUST
 Name

4001 S. DECATUR BLVD #37 #686
 Street Address

LAS VEGAS
 City

3) DUDLEY REALTY, LLC
 Name

4001 S. DECATUR BLVD #37 #686
 Street Address

LAS VEGAS
 City

6. Name, Address and Signature of Organizer: (attach additional page if more than 1 organizer)

I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument to the Secretary of State.

MARC C GORDON
 Name

MARC C GORDON

Organizer Signature

4001 S. DECATUR BLVD #37 #686
 Address

LAS VEGAS
 City

State

7. Certificate of Acceptance of Appointment of Registered Agent:

I hereby accept appointment as Registered Agent for the above named Entity.

MARC C. GORDON

Authorized Signature of Registered Agent or On Behalf of Registered Agent Entity

2/

Date

This form must be accompanied by appropriate fees.

Nevada Secretary of

SECRETARY OF STATE



NEVADA STATE BUSINESS LICENSE

YCS ACQUISITION LLC
Nevada Business Identification # NV20191101894

Expiration Date: February 29, 2020

In accordance with Title 7 of Nevada Revised Statutes, pursuant to proper application duly filed and payment of appropriate prescribed fees, the above named is hereby granted a Nevada State Business License for business activities conducted within the State of Nevada.

Valid until the expiration date listed unless suspended, revoked or cancelled in accordance with the provisions in Nevada Revised Statutes. License is not transferable and is not in lieu of any local business license, permit or registration.



IN WITNESS WHEREOF, I have hereunto
set my hand and affixed the Great Seal of State,
at my office on February 6, 2019

Barbara K. Cegavske

Barbara K. Cegavske
Secretary of State

You may verify this license at www.nvsos.gov under the Nevada Business Search.

**License must be cancelled on or before its expiration date if business activity ceases.
Failure to do so will result in late fees or penalties which by law cannot be waived.**



BARBARA K. CEGAVSKE
 Secretary of State
 202 North Carson Street
 Carson City, Nevada 89701-4201
 (775) 684-5708
 Website: www.nvsos.gov



050106

Articles of Organization Limited-Liability Company

(PURSUANT TO NRS CHAPTER 86)

Filed in the office of <i>Barbara K. Cegavske</i> Barbara K. Cegavske Secretary of State State of Nevada	Document Number 20190056301-27 <hr/> Filing Date and Time 02/06/2019 12:23 PM <hr/> Entity Number E0055692019-1
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(This document was filed electronically.)
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USE BLACK INK ONLY - DO NOT HIGHLIGHT

1. Name of Limited-Liability Company: <small>(must contain approved limited-liability company wording; see instructions)</small>	TAXI TRANSPORT LLC	Check box if a Series Limited- Liability Company <input type="checkbox"/>	Check box if a Restricted Limited- Liability Company <input type="checkbox"/>												
2. Registered Agent for Service of Process: <small>(check only one box)</small>	<input type="checkbox"/> Commercial Registered Agent: _____ Name <input checked="" type="checkbox"/> Noncommercial Registered Agent (name and address below) OR <input type="checkbox"/> Office or Position with Entity (name and address below) MARC C. GORDON Name of Noncommercial Registered Agent OR Name of Title of Office or Other Position with Entity <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; border: none;">4001 S. DECATUR BLVD #37 #686 <small>Street Address</small></td> <td style="width: 20%; border: none;">LAS VEGAS <small>City</small></td> <td style="width: 10%; border: none;">Nevada <small>State</small></td> <td style="width: 15%; border: none;">89103 <small>Zip Code</small></td> </tr> <tr> <td style="border: none;">Mailing Address (if different from street address)</td> <td style="border: none;">City</td> <td style="border: none;">Nevada</td> <td style="border: none;">Zip Code</td> </tr> </table>			4001 S. DECATUR BLVD #37 #686 <small>Street Address</small>	LAS VEGAS <small>City</small>	Nevada <small>State</small>	89103 <small>Zip Code</small>	Mailing Address (if different from street address)	City	Nevada	Zip Code				
4001 S. DECATUR BLVD #37 #686 <small>Street Address</small>	LAS VEGAS <small>City</small>	Nevada <small>State</small>	89103 <small>Zip Code</small>												
Mailing Address (if different from street address)	City	Nevada	Zip Code												
3. Dissolution Date: <small>(optional)</small>	Latest date upon which the company is to dissolve (if existence is not perpetual): _____														
4. Management: <small>(required)</small>	Company shall be managed by: <input type="checkbox"/> Manager(s) OR <input checked="" type="checkbox"/> Member(s) <small>(check only one box)</small>														
5. Name and Address of each Manager or Managing Member: <small>(attach additional page if more than 3)</small>	1) JAMES D. & MARITHA BURTON REVOCABLE TRUST <small>Name</small> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; border: none;">4001 S. DECATUR BLVD #37 #686 <small>Street Address</small></td> <td style="width: 20%; border: none;">LAS VEGAS <small>City</small></td> <td style="width: 10%; border: none;">NV <small>State</small></td> <td style="width: 15%; border: none;">89103 <small>Zip Code</small></td> </tr> </table> 2) JAMIE D. BURTON BENEFICIARY TRUST <small>Name</small> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; border: none;">4001 S. DECATUR BLVD #37 #686 <small>Street Address</small></td> <td style="width: 20%; border: none;">LAS VEGAS <small>City</small></td> <td style="width: 10%; border: none;">NV <small>State</small></td> <td style="width: 15%; border: none;">89103 <small>Zip Code</small></td> </tr> </table> 3) DUDLEY REALTY, LLC <small>Name</small> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; border: none;">4001 S. DECATUR BLVD #37 #686 <small>Street Address</small></td> <td style="width: 20%; border: none;">LAS VEGAS <small>City</small></td> <td style="width: 10%; border: none;">NV <small>State</small></td> <td style="width: 15%; border: none;">89103 <small>Zip Code</small></td> </tr> </table>			4001 S. DECATUR BLVD #37 #686 <small>Street Address</small>	LAS VEGAS <small>City</small>	NV <small>State</small>	89103 <small>Zip Code</small>	4001 S. DECATUR BLVD #37 #686 <small>Street Address</small>	LAS VEGAS <small>City</small>	NV <small>State</small>	89103 <small>Zip Code</small>	4001 S. DECATUR BLVD #37 #686 <small>Street Address</small>	LAS VEGAS <small>City</small>	NV <small>State</small>	89103 <small>Zip Code</small>
4001 S. DECATUR BLVD #37 #686 <small>Street Address</small>	LAS VEGAS <small>City</small>	NV <small>State</small>	89103 <small>Zip Code</small>												
4001 S. DECATUR BLVD #37 #686 <small>Street Address</small>	LAS VEGAS <small>City</small>	NV <small>State</small>	89103 <small>Zip Code</small>												
4001 S. DECATUR BLVD #37 #686 <small>Street Address</small>	LAS VEGAS <small>City</small>	NV <small>State</small>	89103 <small>Zip Code</small>												
6. Name, Address and Signature of Organizer: <small>(attach additional page if more than 1 organizer)</small>	I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is correct and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State. <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; border: none;">MARC C GORDON <small>Name</small></td> <td style="width: 5%; border: none;">X</td> <td style="width: 45%; border: none;">MARC C GORDON <small>Organizer Signature</small></td> </tr> <tr> <td style="border: none;">4001 S. DECATUR BLVD #37 #686 <small>Address</small></td> <td style="border: none;">LAS VEGAS <small>City</small></td> <td style="border: none;">NV 89103 <small>State Zip Code</small></td> </tr> </table>			MARC C GORDON <small>Name</small>	X	MARC C GORDON <small>Organizer Signature</small>	4001 S. DECATUR BLVD #37 #686 <small>Address</small>	LAS VEGAS <small>City</small>	NV 89103 <small>State Zip Code</small>						
MARC C GORDON <small>Name</small>	X	MARC C GORDON <small>Organizer Signature</small>													
4001 S. DECATUR BLVD #37 #686 <small>Address</small>	LAS VEGAS <small>City</small>	NV 89103 <small>State Zip Code</small>													
7. Certificate of Acceptance of Appointment of Registered Agent:	I hereby accept appointment as Registered Agent for the above named Entity. <input checked="" type="checkbox"/> MARC C. GORDON Authorized Signature of Registered Agent or On Behalf of Registered Agent Entity 2/6/2019 Date														

This form must be accompanied by appropriate fees.

Articles of Organization

CONTINUED

Includes data that is too long to fit in the fields on the NRS 86 Form and all additional managers and organizers

ENTITY NAME:	TAXI TRANSPORT LLC
FOREIGN NAME TRANSLATION:	NOT APPLICABLE

REGISTERED AGENT NAME:	MARCC. GORDON
STREET ADDRESS:	4001 S. DECATUR BLVD #37 #686, LAS VEGAS, NV 89103
MAILING ADDRESS:	.. NV

ADDITIONAL MANAGER/MEMBERS
ELIADES POST ROAD LLC 4001 S. DECATUR BLVD #37 #686 LAS VEGAS, NV 89103
ELIADES TAXI ACQUISITION, LLC 4001 S. DECATUR BLVD #37 #686 LAS VEGAS, NV 89103
MILT ENTERPRISES, LLC 4001 S. DECATUR BLVD #37 #686 LAS VEGAS, NV 89103
THE DJW 2010 YCS RETAINED ANNUITY TRUST 4001 S. DECATUR BLVD #37 #686 LAS VEGAS, NV 89103
JOEL WILLDEN 2010 YCS TRUST 4001 S. DECATUR BLVD #37 #686 LAS VEGAS, NV 89103

SECRETARY OF STATE



LIMITED LIABILITY COMPANY CHARTER

I, Barbara K. Cegavske, the Nevada Secretary of State, do hereby certify that TAXI TRANSPORT LLC did on February 6, 2019, file in this office the Articles of Organization for a Limited Liability Company, that said Articles of Organization is now on file and of record in the office of the Nevada Secretary of State, and further, that said Articles contain all the provisions required by the laws governing Limited Liability Companies in the State of Nevada.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on February 6, 2019.

Barbara K. Cegavske

Barbara K. Cegavske
Secretary of State

Certified By: Electronic Filing
Certificate Number: C20190206-1014

SECRETARY OF STATE



NEVADA STATE BUSINESS LICENSE

TAXI TRANSPORT LLC
Nevada Business Identification # NV20191102212

Expiration Date: February 29, 2020

In accordance with Title 7 of Nevada Revised Statutes, pursuant to proper application duly filed and payment of appropriate prescribed fees, the above named is hereby granted a Nevada State Business License for business activities conducted within the State of Nevada.

Valid until the expiration date listed unless suspended, revoked or cancelled in accordance with the provisions in Nevada Revised Statutes. License is not transferable and is not in lieu of any local business license, permit or registration.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on February 6, 2019

Barbara K. Cegavske

Barbara K. Cegavske
Secretary of State

You may verify this license at www.nvsos.gov under the Nevada Business Search.

License must be cancelled on or before its expiration date if business activity ceases. Failure to do so will result in late fees or penalties which by law cannot be waived.



BARBARA K. CEGAUSKE
 Secretary of State
 202 North Carson Street
 Carson City, Nevada 89701-4201
 (775) 684-5708
 Website: www.nvsos.gov



050106

Articles of Organization Limited-Liability Company

(PURSUANT TO NRS CHAPTER 86)

Filed in the office of <i>Barbara K. Cegauske</i> Barbara K. Cegauske Secretary of State State of Nevada	Document Number 20190056333-02
	Filing Date and Time 02/06/2019 12:35 PM
	Entity Number E0055702019-4

(This document was filed electronically.)
 ABOVE SPACE IS FOR OFFICE USE ONLY

USE BLACK INK ONLY - DO NOT HIGHLIGHT

1. Name of Limited-Liability Company: (must contain approved limited-liability company wording; see instructions)	TWENTY FIRST CENTURY TAXI LLC		Check box if a Series Limited-Liability Company	Check box if a Restricted Limited-Liability Company	
			<input type="checkbox"/>	<input type="checkbox"/>	
2. Registered Agent for Service of Process: (check only one box)	<input type="checkbox"/> Commercial Registered Agent:				
	<input checked="" type="checkbox"/> Noncommercial Registered Agent (name and address below) OR <input type="checkbox"/> Office or Position with Entity (name and address below)				
	Name of Noncommercial Registered Agent MARC C. GORDON OR Name of Title of Office or Other Position with Entity				
	Street Address 4001 S. DECATUR BLVD #37 #686		City LAS VEGAS	Nevada 89103 Zip Code	
Mailing Address (if different from street address)		City	Nevada Zip Code		
3. Dissolution Date: (optional)	Latest date upon which the company is to dissolve (if existence is not perpetual):				
4. Management: (required)	Company shall be managed by: <input type="checkbox"/> Manager(s) OR <input checked="" type="checkbox"/> Member(s) (check only one box)				
5. Name and Address of each Manager or Managing Member: (attach additional page if more than 3)	1) JAMES D. & MARITHA BURTON REVOCABLE TRUST Name				
	Street Address 4001 S. DECATUR BLVD #37 #686		City LAS VEGAS	NV 89103 State Zip Code	
	2) JAMIE D. BURTON BENEFICIARY TRUST Name				
	Street Address 4001 S. DECATUR BLVD #37 #686		City LAS VEGAS	NV 89103 State Zip Code	
	3) DUDLEY REALTY, LLC Name				
	Street Address 4001 S. DECATUR BLVD #37 #686		City LAS VEGAS	NV 89103 State Zip Code	
	6. Name, Address and Signature of Organizer: (attach additional page if more than 1 organizer)				
	I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is correct and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.				
	Name MARC C GORDON		X MARC C GORDON Organizer Signature		
Address 4001 S. DECATUR BLVD #37 #686		City LAS VEGAS	NV 89103 State Zip Code		
7. Certificate of Acceptance of Appointment of Registered Agent:	I hereby accept appointment as Registered Agent for the above named Entity.				
X MARC C. GORDON		Authorized Signature of Registered Agent or On Behalf of Registered Agent Entity			
		Date 2/6/2019			

This form must be accompanied by appropriate fees.

Articles of Organization

CONTINUED

Includes data that is too long to fit in the fields on the NRS 86 Form and all additional managers and organizers

ENTITY NAME:	TWENTY FIRST CENTURY TAXI LLC
FOREIGN NAME TRANSLATION:	NOT APPLICABLE

REGISTERED AGENT NAME:	MARCC. GORDON
STREET ADDRESS:	4001 S. DECATUR BLVD #37 #686, LAS VEGAS, NV 89103
MAILING ADDRESS:	.. NV

ADDITIONAL MANAGER/MEMBERS
ELIADES POST ROAD LLC 4001 S. DECATUR BLVD #37 #686 LAS VEGAS, NV 89103
ELIADES TAXI ACQUISITION, LLC 4001 S. DECATUR BLVD #37 #686 LAS VEGAS, NV 89103
MILT ENTERPRISES, LLC 4001 S. DECATUR BLVD #37 #686 LAS VEGAS, NV 89103
THE DJW 2010 YCS RETAINED ANNUITY TRUST 4001 S. DECATUR BLVD #37 #686 LAS VEGAS, NV 89103
JOEL WILLDEN 2010 YCS TRUST 4001 S. DECATUR BLVD #37 #686 LAS VEGAS, NV 89103

SECRETARY OF STATE



LIMITED LIABILITY COMPANY CHARTER

I, Barbara K. Cegavske, the Nevada Secretary of State, do hereby certify that **TWENTY FIRST CENTURY TAXI LLC** did on February 6, 2019, file in this office the Articles of Organization for a Limited Liability Company, that said Articles of Organization is now on file and of record in the office of the Nevada Secretary of State, and further, that said Articles contain all the provisions required by the laws governing Limited Liability Companies in the State of Nevada.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on February 6, 2019.

Barbara K. Cegavske

Barbara K. Cegavske
Secretary of State

Certified By: Electronic Filing
Certificate Number: C20190206-1058

SECRETARY OF STATE



NEVADA STATE BUSINESS LICENSE

TWENTY FIRST CENTURY TAXI LLC

Nevada Business Identification # NV20191102249

Expiration Date: February 29, 2020

In accordance with Title 7 of Nevada Revised Statutes, pursuant to proper application duly filed and payment of appropriate prescribed fees, the above named is hereby granted a Nevada State Business License for business activities conducted within the State of Nevada.

Valid until the expiration date listed unless suspended, revoked or cancelled in accordance with the provisions in Nevada Revised Statutes. License is not transferable and is not in lieu of any local business license, permit or registration.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on February 6, 2019

Barbara K. Cegavske

Barbara K. Cegavske
Secretary of State

You may verify this license at www.nvsos.gov under the Nevada Business Search.

**License must be cancelled on or before its expiration date if business activity ceases.
Failure to do so will result in late fees or penalties which by law cannot be waived.**



BARBARA K. CEGAVSKE
 Secretary of State
 202 North Carson Street
 Carson City, Nevada 89701-4201
 (775) 684-6768
 Website: www.nvsos.gov



05/11/16

**Articles of Organization
 Limited-Liability Company
 (PURSUANT TO NRS CHAPTER 86)**

Filed in the office of <i>Barbara K. Cegavske</i> Barbara K. Cegavske Secretary of State State of Nevada	Document Number 20190056067-76
	Filing Date and Time 02/06/2019 10:40 AM
	Entity Number E0055202019-4

USE BLACK INK ONLY - DO NOT HIGHLIGHT

ABOVE SPACE IS FOR OFFICE USE ONLY

1. Name of Limited-Liability Company: (must contain approved limited-liability company wording see instructions)	CAB TRANSPORT, LLC	Check box if a Series Limited-Liability Company <input type="checkbox"/>	Check box if a Restricted Limited-Liability Company <input type="checkbox"/>
2. Registered Agent for Service of Process: (check only one box)	<input type="checkbox"/> Commercial Registered Agent: <input checked="" type="checkbox"/> Noncommercial Registered Agent (name and address below) MARC C. GORDON Name of Noncommercial Registered Agent OR Name of Title of Office or Other Position with Entity 4001 S. DECATUR BLVD #37 #686 Street Address LAS VEGAS Nevada 89103 City State Zip Code Mailing Address (if different from street address) Nevada City State Zip Code	<input type="checkbox"/> Office or Position with Entity (name and address below)	
3. Dissolution Date: (optional)	Latest date upon which the company is to dissolve (if existence is not perpetual):		
4. Management: (required)	Company shall be managed by: <input type="checkbox"/> Manager(s) OR <input checked="" type="checkbox"/> Member(s) (check only one box)		
5. Name and Address of each Manager or Managing Member: (attach additional page if more than 3)	1) JAMES D. & MARITHA BURTON REVOCABLE TRUST Name 4001 S. DECATUR BLVD #37 #686 Street Address LAS VEGAS NV 89103 City State Zip Code 2) JAMIE D. BURTON BENEFICIARY TRUST Name 4001 S. DECATUR BLVD #37 #686 Street Address LAS VEGAS NV 89103 City State Zip Code 3) DUDLEY REALTY, LLC Name 4001 S. DECATUR BLVD #37 #686 Street Address City State Zip Code		
6. Name, Address and Signature of Organizer: (attach additional page if more than 1 organizer)	I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is correct and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing to the Office of the Secretary of State. MARC C. GORDON Name 4001 S. DECATUR BLVD #37 #686 Address LAS VEGAS NV 89103 City State Zip Code Organizer Signature: <i>Marc C. Gordon</i>		
7. Certificate of Appointment of Registered Agent:	I hereby accept appointment as Registered Agent for the above named Entity if the registered agent is unable to sign the Articles of Organization submit a separate signed Registered Agent Acceptance form <input checked="" type="checkbox"/> <i>Marc C. Gordon</i> Authorized Signature of Registered Agent or On Behalf of Registered Agent Entity Date: <i>2-6-19</i>		

This form must be accompanied by appropriate fees.



BARBARA K. CEGAVSKE
 Secretary of State
 202 North Carson Street
 Carson City, Nevada 89701-4201
 (775) 684-6708
 Website: www.nvsos.gov



1157106

**Articles of Organization
 Limited-Liability Company
 (PURSUANT TO NRS CHAPTER 86)**

USE BLACK INK ONLY - DO NOT HIGHLIGHT

ABOVE SPACE IS FOR OFFICE USE ONLY

1. Name of Limited-Liability Company: <small>(must contain approved limited-liability company wording; see instructions)</small>	CAR TRANSPORT, LLC		Check box if a Series Limited-Liability Company <input type="checkbox"/>	Check box if a Restricted Limited-Liability Company <input type="checkbox"/>
2. Registered Agent for Service of Process: <small>(check only one box)</small>	<input type="checkbox"/> Commercial Registered Agent <input checked="" type="checkbox"/> Noncommercial Registered Agent <small>(name and address below)</small> MARC C. GORDON <small>Name of Noncommercial Registered Agent</small> 4001 S. DECATUR BLVD #37 #686 <small>Street Address</small> <small>Mailing Address (if different from street address)</small>		<input type="checkbox"/> Office or Position with Entity <small>(name and address below)</small> LAS VEGAS Nevada NV9103 <small>City State Zip Code</small> Nevada Nevada <small>City Zip Code</small>	
3. Dissolution Date: <small>(optional)</small>	Latest date upon which the company is to dissolve (if existence is not perpetual):			
4. Management: <small>(required)</small>	Company shall be managed by: <input type="checkbox"/> Manager(s) OR <input checked="" type="checkbox"/> Member(s) <small>(check only one box)</small>			
5. Name and Address of each Manager or Managing Member: <small>(attach additional page if more than 3)</small>	1) ELIADES POST ROAD, LLC <small>Name</small> 4001 S. DECATUR BLVD #37 #686 <small>Street Address</small> LAS VEGAS NV 89103 <small>City State Zip Code</small> 2) ELIADES TAXI ACQUISITION, LLC <small>Name</small> 4001 S. DECATUR BLVD #37 #686 <small>Street Address</small> LAS VEGAS NV 89103 <small>City State Zip Code</small> 3) MILT ENTERPRISES, LLC <small>Name</small> 4001 S. DECATUR BLVD #37 #686 <small>Street Address</small> LAS VEGAS NV 89103 <small>City State Zip Code</small>			
6. Name, Address and Signature of Organizer: <small>(attach additional page if more than 1 organizer)</small>	I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is correct and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instruments for filing in the Office of the Secretary of State. MARC C. GORDON <small>Name</small> 4001 S. DECATUR BLVD #37 #686 <small>Address</small> LAS VEGAS NV 89103 <small>City State Zip Code</small> <input checked="" type="checkbox"/> <small>Organizer Signature</small>			
7. Certificate of Acceptance of Appointment of Registered Agent:	I hereby accept appointment as Registered Agent for the above named Entity if the registered agent is unable to sign the Articles of Organization, submit a separate signed Registered Agent Acceptance form. <input checked="" type="checkbox"/> <small>Authorized Signature of Registered Agent or On Behalf of Registered Agent Entity</small>			

This form must be accompanied by appropriate fees



BARBARA K. CEGAUSKE
 Secretary of State
 202 North Carson Street
 Carson City, Nevada 89701-4201
 (775) 684-5708
 Website: www.nvsos.gov



1991061

**Articles of Organization
 Limited-Liability Company
 (PURSUANT TO NRS CHAPTER 86)**

USE BLACK INK ONLY - DO NOT HIGHLIGHT

ABOVE SPACE IS FOR OFFICE USE ONLY

1. Name of Limited-Liability Company: <small>(must contain approved limited-liability company wording; see instructions)</small>	CAB TRANSPORT, LLC	Check box if a Series Limited-Liability Company <input type="checkbox"/> Check box if a Restricted Limited-Liability Company <input type="checkbox"/>
2. Registered Agent for Service of Process: (check only one box)	<input type="checkbox"/> Commercial Registered Agent: <input checked="" type="checkbox"/> Noncommercial Registered Agent Name (name and address below) OR <input type="checkbox"/> Office or Position with Entity (name and address below) MARC C. GORDON <small>Name of Noncommercial Registered Agent OR Name of Title of Office or Other Position with Entity</small> 4001 S. DECATUR BLVD #37 #686 LAS VEGAS Nevada 89103 <small>Street Address City State Zip Code</small> 4001 S. DECATUR BLVD #37 #686 LAS VEGAS Nevada <small>Mailing Address (if different from street address) City State Zip Code</small>	
3. Dissolution Date: (optional)	Latest date upon which the company is to dissolve (if existence is not perpetual).	
4. Management: (required)	Company shall be managed by: <input type="checkbox"/> Manager(s) OR <input checked="" type="checkbox"/> Member(s) <small>(check only one box)</small>	
5. Name and Address of each Manager or Managing Member: <small>(attach additional page if more than 3)</small>	1) THE DJW 2010 YCS RETAINED ANNUITY TRUST <small>Name</small> 4001 S. DECATUR BLVD #37 #686 LAS VEGAS NV 89103 <small>Street Address City State Zip Code</small> 2) JOEL WILLDFN 2010 YCS TRUST <small>Name</small> 4001 S. DECATUR BLVD #37 #686 LAS VEGAS NV 89103 <small>Street Address City State Zip Code</small> 3) <small>Name</small> <small>Street Address City State Zip Code</small>	
6. Name, Address and Signature of Organizer: (attach additional page if more than 1 organizer)	I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is correct and acknowledge that pursuant to NRS 229.338, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State. MARC C. GORDON <small>Name</small> 4001 S. DECATUR BLVD #37 #686 LAS VEGAS NV 89103 <small>Address City State Zip Code</small> X <small>Organizer Signature</small>	
7. Certificate of Acceptance of Appointment of Registered Agent:	I hereby accept appointment as Registered Agent for the above named Entity. If the registered agent is unable to sign the Articles of Organization, submit a separate signed Registered Agent Acceptance form. X <small>Authorized Signature of Registered Agent or On Behalf of Registered Agent Entity</small> Date 8/6/19	

This form must be accompanied by appropriate fees.

SECRETARY OF STATE



LIMITED LIABILITY COMPANY CHARTER

I, Barbara K. Cegavske, the Nevada Secretary of State, do hereby certify that **CAB TRANSPORT, LLC** did on February 6, 2019, file in this office the Articles of Organization for a Limited Liability Company, that said Articles of Organization is now on file and of record in the office of the Nevada Secretary of State, and further, that said Articles contain all the provisions required by the laws governing Limited Liability Companies in the State of Nevada.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on February 6, 2019.

Barbara K. Cegavske

Barbara K. Cegavske
Secretary of State

Certified By: Raphael Alves
Certificate Number: C20190206-0709

SECRETARY OF STATE



NEVADA STATE BUSINESS LICENSE

CAB TRANSPORT, LLC

Nevada Business Identification # NV20191101595

Expiration Date: February 29, 2020

In accordance with Title 7 of Nevada Revised Statutes, pursuant to proper application duly filed and payment of appropriate prescribed fees, the above named is hereby granted a Nevada State Business License for business activities conducted within the State of Nevada.

Valid until the expiration date listed unless suspended, revoked or cancelled in accordance with the provisions in Nevada Revised Statutes. License is not transferable and is not in lieu of any local business license, permit or registration.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on February 6, 2019

Barbara K. Cegavske

Barbara K. Cegavske
Secretary of State

You may verify this license at www.nvsos.gov under the Nevada Business Search.

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Failure to do so will result in late fees or penalties which by law cannot be waived.**