

PO3000059426

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

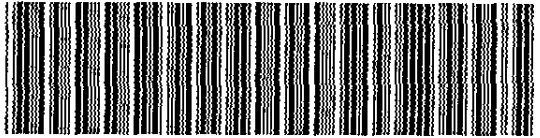
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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05/30/03--01052--031 \*\*78.75

SECRETARY OF STATE  
MILWAUKEE, WISCONSIN

03 MAY 30 PM 2:31

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RECEIVED  
03 MAY 30 PM 12:52  
DIVISION OF CORPORATION

BM 5/30

OFFICE USE ONLY(DOCUMENT #)

**LAZARUS CORPORATE FILING SERVICE**

**3320 S.W. 87 AVENUE**

**MIAMI, FLORIDA (305)552-5973**

**TERESA ROMAN ( TALLAHASSEE REPRESENTATIVE)**

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. ANDY LIMOUSINE SERVICES INC.  
(Corporation Name) (Document #)

2. \_\_\_\_\_  
(Corporation Name) (Document #)

3. \_\_\_\_\_  
(Corporation Name) (Document #)

4. \_\_\_\_\_  
(Corporation Name) (Document #)

- Walk in   
  Pick up time 2:00   
  Certified Copy  
 Mail out   
  Will wait   
  Photocopy   
  Certificate of Status

NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Examiner's Initials

**ARTICLES OF INCORPORATION**

IN ACCORDANCE WITH chapter 607 and/or Chapter 621,F.S. (Profit)

ARTICLE I NAME

THE NAME OF THE CORPORATION SHAL BE:  
**ANDY LIMOUSINE SERVICES INC.**

ARTICLE II PRINCIPAL OFFICE

THE PRINCIPAL PLACE OF BUSINESS / MAILING ADDRESS IS:  
**P.O. BOX 832980**  
**MIAMI,FLORIDA 33283-2980**

ARTICLE III PURPOSE

THE PURPOSE FOR WHICH THE CORPORATION IS ORGNIZED IS:  
**THIS CORPORATION MAY ENGAGE IN ANY AND LAWFUL  
BUSINESS IN THE TRANSPORTATION SERVICES INDUSTRY  
PERMITTED UNDER THE LAWS OF THE USA, THE STATE OF  
FL.OR ANY OTHER STATE, COUNTRY, TERRITORY OR  
NATION.**

ARTICLE IV SHARES

THE NUMBERS OF SHARES OF STOCKS IS:  
**100 – SHARES \$ 10.00 PAR VALUE**

ARTICLE V INITIAL OFFICERS / DIRECTORS

THE NAME (S) AND ADDRESS (ES):  
**ANOUSHEH SARFARAZ (P.VP.T.S)**  
**P.O. BOX 832980**  
**MIAMI,FL 33283-2980**

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TALLAHASSEE FL 32301

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ARTICLE VI REGISTERED AGENT

The name and Florida Street address of the registered agent is:

**BOB. BENITEZ**  
**3529 S.W. 112 PLACE**  
**MIAMI FLORIDA 33165**

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

**ANOUSHEH SARFARAZ**  
**P.O. BOX 832980**  
**MIAMI FLORIDA 33283-2980**

.....  
Having been named as registered agent to accept services 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

*Bob Benitez*  
.....  
Signature/Registered Agent

*5/28/03*  
.....  
Date

*Anousheh Sarfaraz*  
.....  
Signature/Incorporator

*5/28/03*  
.....  
Date

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