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MELANISSA J. O'KEEFE

D O'KEEFE  
MAY 18 2017

**COVER LETTER**

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

**SUBJECT:** UNONCEL TRANSPORTATION, INC.  
(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

\$70.00 Filing Fee  
 \$78.75 Filing Fee & Certificate of Status

|  |   |
|--|---|
| <input type="checkbox"/> \$78.75 Filing Fee & Certified Copy | <input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status |
| <b>ADDITIONAL COPY REQUIRED</b>                              |   |

**FROM:** DIEUSEUL UNONCEL  
Name (Printed or typed)

930 NE 164TH STREET  
Address

NORTH MIAMI BEACH FL, 33162  
City, State & Zip

786-541-3623  
Daytime Telephone number

ADTAX5363@GMAIL.COM  
E-mail address: (to be used for future annual report notification)

**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 I NAME**

The name of the corporation shall be: UNONCEL TRANSPORTATION, INC.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
930 NE 164TH STREET

NORTH MIAMI BEACH FL, 33162

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: The purpose of this corporation is: to provide transportation to all those who decide to ride with me whether they have cars or not, I transport people to work everyday for a fee

**ARTICLE IV SHARES**

The number of shares of stock is: 50

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: PRESIDENT Name and Title: \_\_\_\_\_

Address: DIEUSEUL UNONCEL Address: \_\_\_\_\_

930 NE 164th STREET

N. MIAMI BCH FLORIDA, 33162

Name and Title: VP Name and Title: \_\_\_\_\_

Address: DIEUSEUL UNONCEL Address: \_\_\_\_\_

930 NE 164th STREET

N. MIAMI BEACH FLORIDA 33162

Name and Title: TREASURER Name and Title: \_\_\_\_\_

Address: DIEUSEUL UNONCEL Address: \_\_\_\_\_

930 NE 164th STREET

N. MIAMI BCH FLORIDA, 33162

17 MAY 17 PM 12:05

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: DIEUSEUL UNONCEL  
 Address: 930 NE 164th STREET  
N. MIAMI BCH FLORIDA, 33162

**ARTICLE VII INCORPORATOR**

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

Name: DIEUSEUL UNONCEL  
 Address: 930 NE 164TH STREET  
N. MIAMI BEACH FLORIDA 33162

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**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: 05/03/2017 (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:*

*Dieuseul UNONCEL* 05/03/2017  
 Required Signature/Registered Agent 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.*

*Dieuseul UNONCEL* 05/03/2017  
 Required Signature/Incorporator Date