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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	of Status
Special Instructions to I	Filing Officer:	
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TRANSMITTAL LETTER

Department of State Division of Corporation P. O. Box 6327 Tallahassee, FL 32314	s	- 		
SUBJECT: KE	PROPOSED CORFORATE	ENAME - MUST INCLUI	OCIATION DE SUFFIX)	
Enclosed is an original a	and one(1) copy of the article	es of incorporation and a	check for:	
☐ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$\$78.75 Fing Fee\ & Certified\Copy	\$87.50 Filing Fee, Certified Copy & Certificate	
		ADDITIONAL CO	PY REQUIRED	
FROM: MICHAEL E. OLANOFF Name (Printed or typed)				
3333 DUCK-AVE. L-207 Address				
	KEY WEST	FU, 330 ate & Zip	.40	
	305 - 293 Daytime Tele	DIZZ phone number	 	

NOTE: Please provide the original and one copy of the articles.

In Compliance with Chapter 617, F.S., (Not for Profit)
ARTICLE I NAME The name of the corporation shall be: KEY WEST TAXI ASSOCIATION INC, & E.S.
ARTICLE II PRINCIPAL OFFICE
The principal place of business and mailing address of this corporation shall be:
800 14TH ST., KEY WEST, FC. 33040 = 1975
ARTICLE III PURPOSE The purpose for which the corporation is organized is:
TO BOUCATE LICENSED FAXI DRIVERS IN KEY WE
FL. AS TO LAWS AND ORDINANCES PERTINANT TO PROFES
ARTICLE IV MANNER OF ELECTION AND TRAIN NEW ORIVERS TO HIGHE THE manner in which the directors are elected or appointed:
DIRECTORS ARE ELECTED BY PRIVATE BALLOT
BY MEMBERSHIP AT LARGE.
ARTICLE V INITIAL DIRECTORS/OFFICERS The name(s), address(es) and title(s): MICHAEL E. OLANOFF CO-FOUNDER 3333 DUCK AVE L-207 CYNTHIA ENRIGHT TREASTRER LINDA DI NATCOLA SECRETARY GENERAL
ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and Florida street address of the registered agent is:
MICHAEL E. OLANOF, 3333 DUCK AVE. 1-207
KEY WEST, FC. 33040 =
ARTICLE VII INCORPORATOR
The name and address of the Incorporator is: MICHAEL E. OLANOFF, 33.33 OUCK AVE, L-20F
KEY WEST- FL. 33040 =

in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.

Date

Signature/Registered Agent

Signature/Incorporator