## P000039013

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

900003207293----04/13/00--01061--014 \*\*\*\*\*\*78.75 \*\*\*\*\*\*78.75

SUBJECT:	FIRST CHOICE LIMO I (Proposed corp	MC . orate name - must include su		
Enclosed is an origin	nal and one(1) copy of the artic	les of incorporation and a	check for:	
☐ \$70.00 Filing Fee	Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	, ,
FROM:	JEFFREY I DEA	N Printed or typed)		
	3219 - N, E, 32n	d Ave Address	OO APR 13 SECRETARY TALLAHASSE	TAPAGEMENT -
	(352) 622	, State & Zip -8778	AM 8: 41 OF STATE EF, FLORIDA	17
	Daytime	Celephone number	—— <b>P</b>	

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

ARTICLES OF INCORPORATION	· ·
The undersigned incorporator, for the purpose of forming a cor Business Corporation Act, hereby adopts the following Articles  ARTICLE I NAME  The name of the corporation shall be: First Choice	of Incorporation.  SECKETONIA AM 8:41
ARTICLE II PRINCIPAL OFFICE  The principal place of business and mailing address of this  Ocala, Fla. 34479	s corporation shall be: 3219 N.E. 32nd Ave.
ARTICLE III SHARES  The number of shares of stock that this corporation is authorized as the stock of the sto	norized to have outstanding at any one time is: 500
ARTICLE IV INITIAL REGISTERED AGE.  The name and Florida street address of the initial registered processes of the initial registered proc	NT AND STREET ADDRESS ed agent are:
ARTICLE V INCORPORATOR  The name and address of the incorporator to these Artic  GARY H, WILLIAMS  3230 N, E, 10th St  Ocala, F1 34470	les of Incorporation are:
Saught Mille- Signature/Incorporator	04/12/00 Date
/// Signature/incorporator	2-00

(An additional article must be added if an effective date is requested.)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent

Signature/Registered Agent

04/12/00

Date