

# TRANSMITTAL LETTER

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

300003443513--8  
-10/30/00--01090--021  
\*\*\*\*\*87.50 \*\*\*\*\*87.50

SUBJECT: CAPTIVA LIMOUSINE SERVICE, INC.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is 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

☐ \$78.75 Filing Fee & Certified Copy  
☒ \$87.50 Filing Fee, Certified Copy & Certificate of Status

ADDITIONAL COPY REQUIRED

FROM: DOUGLAS RANKOVIC  
Name (Printed or typed)

6055 MACARTHUR LN.  
Address

FT. MYERS, FL. 33908  
City, State & Zip

(941) 482-7411  
Daytime Telephone number

FILED  
00 OCT 30 AM 11:40  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

gy 10/31

**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:

CAPTIVA LIMOUSINE SERVICE, INC.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

P.O. BOX 328  
CAPTIVA IS., FL. 33924

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

PRIVATE LIMOUSINE SERVICE

**ARTICLE IV SHARES**

The number of shares of stock is:

100

**ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)**

The name(s) and address(es):

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address registered agent is:

DOUGLAS RAIKOVIC  
6055 MACBETH LN.  
FT. MYERS, FL. 33908


**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

DOUGLAS RAIKOVIC  
6055 MACBETH LN.  
FT. MYERS, FL. 33908

\*\*\*\*\*

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

  
\_\_\_\_\_  
Signature/Registered Agent

10-26-00  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

10-26-00  
\_\_\_\_\_  
Date

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

00 OCT 30 AM 11:40

FILED