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## Florida Department of State

Division of Corporations Public Access System Katherine Harris, Secretary of State

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To:

Division of Corporations

Fax Number

: (850)922-4001

From:

Account Name : FAS-T CORP. AGENTS, INC.

Account Number : 071001002335

Phone Fax Number : (305)599-0839 : (305)716-0346

#### FLORIDA PROFIT CORPORATION OR P.A.

PERSONALIZED LIMO SERVICE, INC.

Certificate of Status	0
Certified Copy	1
Page Count	(03)
Estimated Charge	\$78.75

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## ARTICLES OF INCORPORATION OF

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida General Corporation Act, hereby adopt(s) the following Articles of incorporation.

#### ARTICLE I NAME

The name of the corporation shall be: PERSONALIZED LIMO SERVICE, INC.

The principal place of business of this corporation shall be: 12945 SW 34 Place
Davie, FL 33330

#### ARTICLE IL NATURE OF BUSINESS

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, country, territory or nation.

#### ARTICLE III CAPITAL STOCK

The aggregate number of shares of stock and its value that this corporation is authorized to have outstanding at any one time is: Five Thousand (5,000) shares of ten cent (\$.10) par value.

### ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE V OFFICERS DIRECTORS

The name(s) and street address(es) of the initial officer(s) and director(s), if any, who shall hold office the first year of the corporation's existence or until their successor(s) is(are) elected, is(are):

FRANCINA BERMAN , PRESIDENT 12945 SW 34 Place Davie, FL 33330

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SECRETARY OF STATE
TALL A HASSIF FLORIDA

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## ARTICLE VI INCORPORATORISI

The name(s) and street address(es) of the incorporator(s) to this articles of incorporation is(are):

FRANCINA BERMAN 12945 SW 34 Place Davie, Fl 33330

	WHER!	OF, the Articles	und of	lersigned incor incorporation	porator(s)	has(have)
day of						· · · · · · · · · · · · · · · · · · ·

Signature(s) of Incorporator(s)

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## CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607.325. Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the corporation:
PERSONALIZED LIMO SERVICE, INC.
2. The name and address of the registered agent and office is: STUART H. GLAUSER 12910 S.W. 84 Street
(P.O. BOX NOT ACCEPTABLE)
Miami, FL 33183
(CITY/STATE/ZIP)
SIGNATURE / WASAN Dez
TITLE
DATE / /0/01

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE. I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325, FLORIDA STATUTES.

DATE //0/01