# P01000051409

FILED

01 HAY 17 PM 3: 08

TRANSMITTAL LETTER

SECRETALL OF STATE TALLAHASSEE, FLORIDA

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

Yellow Cab of Sarasota County, 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** 

Filling Fee

& Certified Coby

\$87.50

Filing Fée,

Certified Copy & Certificate of

Status

ABBITTONAL COPY REQUIRED

FROM: John Capaccione

Name (Printed or typed)

2011 Cornell St.

Address

Sarasota, FL 34237

City, State & Zip

(941)355-3341

Daytime Telephone number

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

CD5-23

#### ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida

Business Corporation Act, hereby adopts the following Articles of Incorporation. 01 MAY 17 PM 3:08

## ARTICLE I NAME

The name of the corporation shall be:

SECRETARY OF STATE TALLAHASSEE, FLORIDA

Yellow Cab of Sarasota\_County, Inc.

#### ARTICLE II PRINCIPAL OFFICE

The britteipal place of business and mailing address of this corporation shall be:

2011 Cornell Street Sarasota, FL 34237

#### <u>Akticle III — Shares</u>

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

5,000 Shares of No Par Stock

## ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The hame and Florida street address of the initial registered agent are:

John Capaccione 1620 Platt Street Sarasota, FL 34236

### ARTICLE V INCORPORATOR

The Hattle and address of the incorporator to these Atticles of Incorporation are:

John Capaccione 1620 Platt Street Sarasota, FL 34236

Signature/Incorporator

5/14/01 Dáte

(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 pmy position as registered agent

Signature/Registered Agent

Date