TRANSMITTAL LETTER

P01000051824 APPROVED

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

01 14	AY 24	PM 12	- 5
SECR	ETARY	UF STA	TE
TALLAR	JASSEE,	FLORI	DA

SUBJECT:		LIMOUSINES			_		
	(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)						
		•		•	1		

sed is all original and one(1) copy of the articles of incorporation and a check for:				
\$\times \\$70.00 \\$78.75 \\ Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED		
	L inted or typed)			
193 OLD NA	HLS RD			
CKAWFORTDULL City, S	CUE FL 3	32327		
8th -4	71-1927			

000004315430--1 -**05/24/01--01020--029** *****70.00 ********70.00**

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

Daytime Telephone number

C(6994))