

# PO1000053725

## TRANSMITTAL LETTER

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

100004315321--1  
-05/24/01--01067--009  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

SUBJECT: SOUTH BEACH Custom Couriers 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:

TREVOR Simmons CHisHolm  
Name (Printed or typed)

455 N.E. 62ND STREET #1  
Address

MIAMI FL, 33138  
City, State & Zip

(305) - 903 - 0873  
Daytime Telephone number

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

FILED  
01 MAY 31 PM 2:04  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

W01-12266

# 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:

South Beach Custom Couriers Inc.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

927 Lincoln RD, Suite 200  
Miami Beach, FL 33139

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Delivery & Pick ups, Daily Courier Duties To own my own business  
THE WRIGHT WAY

## ARTICLE IV SHARES

The number of shares of stock is:

100

## ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

Trevor S. CHisHolm  
455 NE 62ND ST #1  
Miami FL 33138

## ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

Trevor S. CHisHolm  
455 NE 62ND ST #1  
Miami FL 33138

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Trevor S. CHisHolm  
455 NE 62ND ST #1  
Miami FL 33138

\*\*\*\*\*  
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

Signature/Incorporator

Date

Date

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

01 MAY 31 PM 2:04

FILED

5/18/01

5/18/01