

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

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SUBJECT: PLEASURE TOURS TAXI SERVICE INC.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is an origin	nal and one(1) copy of the artic	cles of incorporation and a	check for:
☐ \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status
		ADDITIONAL CC	T REQUIRED

FROM: TREVOR ANTHONY TRVING Name (Printed or typed)		01 SEP	12000
717 NE LANFAIR ST Address	ARY	P 20 PM	
PORT ST. JULIE FZ. 34 783 City, State & Zip	10°	M 4: 27	
<u>S6/- 873 - 9245</u> Daytime Telephone number			

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

T. Burch SEP 2 1 2001

ARTICES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)
ARTICLE I NAME PLEASURE TOURS TAXI SERVICE INC. The name of the corporation shall be:
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 7/7 NE LANFAIR ST PORT ST Lucie FC 34783
ARTICLE III PURPOSE The purpose for which the corporation is organized is: TRANSPORTATION
ARTICLE IV SHARES The number of shares of stock is:
ARTICLE V INITIAL OFFICERS DIRECTORS (optional) The name(s) and address(es): TREVOR IRVING 117 NE LANFAIR ST PORT ST LUCIE FL 34 983
ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is: THEY A THUNG 111 NELAWFIA ST PONT ST LINCIS FC 34983 ARTICLE VII INCORPORATOR THUST
The <u>name and address</u> of the Incorporator is:
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 S 20 0 Date
Signature/Incorporator 8/20/0/ Date