Division of Corporations



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

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To:

Division of Corporations

Fax Number : (850)205-0381

Prom:

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

Account Number : 071001002335 Phone : (305)599-0839 Fax Number : (305)716-0346

## FLORIDA PROFIT CORPORATION OR

TAXI INSURANCE COLLECTION ASSOCIATION

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

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#### ARTICLES OF INCORPORATION

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#### TAKI INSURANCE COLLECTION ASSOCIATION CO.

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

#### ARTICLE I NAME

The Name of the corporation shall be:

#### TAXI INSURANCE COLLECTION ASSOCIATION CO.

The principal place of business of this corporation shall be:

251 174<sup>TH</sup> STREET # 1518 SUNNY ISLES, FL 33160

#### ARTICLE II 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

Aggregate number of shares of stock and its value that this corporation is authorized to have outstanding at any time is one hundred shares ( 100 ) at \$5.00 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 directors(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):

DIRECTOR/PRESIDENT BORIS SHAVARTSMAN
251 174<sup>TR</sup> STREET # 1518
SUNNY ISLES, FL 33160

## ARTICLE VI INCORPORATOR (S)

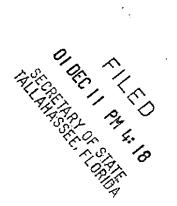
The name(s) and street address(es) of the incorporator(s) to these articles of incorporation is (are):

BORIS SHAVARTSMAN 251 174<sup>TE</sup> STREET # 1518 SUNNY ISLES, FL 33160

IN WITNESS WHEREOF, the undersigned incorporator(s) has (have) executed the Articles of Incorporation this  $11^{2\pi}$  day of December, 2,001.

Signature of incorporator(s)

BORIS SHAVARTSMAN



### ERTIFICATE 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.

The name of the corporation:

# TAXI INSURANCE COLLECTION ASSOCIATION CO.

The name and address of the registered agent and office is:

BORIS SHAVARTSMAN 251 174 STREET # 1518 SUNNY ISLES, FL 33160

TITLE:

SIGNATURE: X DO DE LEVY

		· ·	•	
DATE:	12/11/01	<u>.                                    </u>		
CERTIFICATE, I FURTHER AGREE REJATIVE TO	NAMED TO ACCEPT CORPORATION, AT HEREBY AGREE TO TO COMPLY WITH TO THE PROPER AND ACCEPT THE DUTI A STATUTES	THE PLACE DE O ACT IN THIS THE PROVISIONS	SIGNATED CAPACITY OF ALL S	IN THIS , AND I TATUTES

SIGNATURE: X Bois Sura 12/11/01 DATE:

607.325 FLORIDA STATUTES.