## P03000078372

(Requestor's Name)		
UNIMET Transport Services, Inc. 4251 SW 13th Street 9B Gainesville, FL 32608		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Basilloso Ellas) Nalley		
(S. von and Niverban)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		
D. WHITE JUL 1 6 2003		

Office Use Only



600021479106

07/15/03--01006--002 \*\*70.00

FILED

93 JUL 14 PM 6: 38
SECRETARY U. STATE
SECRETARY U. STATE

## TRANSMITTAL LETTER

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

SUBJECT: UNIME! CAB CO.. (PROPOSED CORPORATE NAME—<u>MUST INCLUDE SUFFIX)</u>

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

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:	FILED	
UNIMET CAB CO.	03 JUL 14 PM 6: 38	
ARTICLE II PRINCIPAL OFFICE  The principal place of business/mailing address is:  425/5\omega 13th 5TREET Suite 9th	SECRETARY OF STATE TALL AHASSEE FLORIDA	
CAINES VILLE, FL 32608  ARTICLE III PURPOSE  The purpose for which the corporation is organized is:		
TAXI CAB		
ARTICLE IV SHARES The number of shares of stock is:		
100		
List name(s), address(es) and specific title(s):  WILSON AULAS: PRESTIDE		
ARTICLE VI REGISTERED AGENT		
The <u>name and Florida street address</u> of the registered agent is:		
JOY PAULAS		
530 HE 10 th ST GAINES VILLE EL 32601		
ARTICLE VII INCORPORATOR  The name and address of the Incorporator is:		
WILSON PAULAS =		
530 NE LOBA STREE		
GAINESVIIE, FC 32601	*********	
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	$7 = 10^{-0}3$ Date	

Signature/Incorporator

7-10-03 Date