

PO 3000128072

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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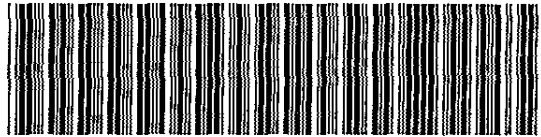
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TS
11/07/03

TRANSMITTAL LETTER

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

SUBJECT: PROFESSIONAL DRIVER'S ACADEMY, INC.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are 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: RAELYN C. JOHNSON

Name (Printed or typed)

7431 OLYMPIA STREET

Address

NAVARRE, FLORIDA 32566

City, State & Zip

(850) 936-6706 or (850) 685-4454-cell#

Daytime Telephone number

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

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:

PROFESSIONAL DRIVER'S ACADEMY, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

8800 ELY ROAD, PENSACOLA, FLORIDA 32514

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO PROVIDE QUALITY TRAINING TO THOSE SEEKING A PROFESSION IN THE
TRANSPORTATION INDUSTRY.

ARTICLE IV SHARES

The number of shares of stock is:

1,000. shares

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

RAELYN C. JOHNSON, 7431 Olympia Street, Navarre, FL 32566
PRESIDENT

ARTICLE VI REGISTERED AGENT

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

RAELYN C. JOHNSON, 7431 Olympia Street, Navarre, FL 32566

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

RAELYN C. JOHNSON, 7431 Olympia Street, Navarre, FL 32566

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

Raelyn C Johnson
Signature/Registered Agent

10-28-03
Date

Raelyn C Johnson
Signature/Incorporator

10-28-03
Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA