

P04000033021

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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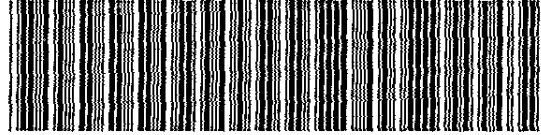
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

✓

62-119

## TRANSMITTAL LETTER

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

**SUBJECT:** ADVANCE TRAFFIC SCHOOL OF FLORIDA 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:** JEAN GUIVARD GISME OR MARIE LUCIA GISME

Name (Printed or typed)

12500 NE 8th AVENUE SUITE #4 2nd FLOOR

Address

NORTH MIAMI FLORIDA 33125

City, State & Zip

786-457-3093// //305-866-6040 // // 305-945-5944//

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:

ADVANCE TRAFFIC SCHOOL OF FLORIDA INC

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

12500 NE 8th AVENUE SUITE # 4 2nd FLOOR  
NORTH MIAMI FLORIDA 33161

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

FOR PROFIT

## ARTICLE IV SHARES

The number of shares of stock is:

50

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

JEAN GUIVARD GISME  
PRESIDENT

MARIE LUCIA GISME  
VICE PRESIDENT

## ARTICLE VI REGISTERED AGENT

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

JEAN GUIVARD GISME  
2074 NE 170 STREET  
NORTH MIAMI BEACH FL 33162

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

JEAN GUIVARD GISME or MARIE LUCIA GISME  
12500 NE 8th AVENUE SUITE # 4 2nd FLOOR  
NORTH MIAMI FLORIDA 33161

\*\*\*\*\*

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

Jean Guivard Gisme  
Signature/Registered Agent

02-10-2004

Date

Marie L. Gisme  
Signature/Incorporator

02-10-2004

Date

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA