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(Business Entity Name)

(Document Number)

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03/18/04--01005--005 **78.75

FILED
04 MAR 29 AM 8:42
TALLAHASSEE, FLORIDA

TH 3/30/04

TRANSMITTAL LETTER

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

SUBJECT: _____

SAFE Ride 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: _____

Michael Rodney
Name (Printed or typed)

P.O. Box 101085
Address

FL. Lauderdale FL 33310
City, State & Zip

954-777-2734
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

March 20, 2004

MICHAEL RODNEY
P O BOX 101085
FT LAUDERDALE, FL 33310

SUBJECT: SAFE RIDE INC.
Ref. Number: W04000011248

RECEIVED
04 MAR 29 PM 2:22
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

We have received your document for SAFE RIDE INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock.

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6855.

Tammy Hampton
Document Examiner
New Filings Section

Letter Number: 504A00018538

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:

SAFE Ride INC.

FILED

04 MAR 29 AM 8:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

2750 NW 56 Ave. F505
LAUDER HILL FL. 33313

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Provides NONEMERGENCY
MEDICAL TRANSPORTATION Service s

ARTICLE IV SHARES

The number of shares of stock is:

8 shares 500 X \$10 = \$5000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Michael Rodney (DIRECTOR)
2750 NW 56 Ave. F505
LAUDER HILL FL 33313

ARTICLE VI REGISTERED AGENT

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

Michael Rodney
2750 NW 56 Ave. F505
LAUDER HILL FL. 33313

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Michael Rodney
2750 NW 56 Ave F505
LAUDERHILL FL. 33313

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

Date

Signature/Incorporator

Date