

P05000065257

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300052293533

05/03/05--01035--013 **70.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

05 MAY -3 PM 2:15

FILED

5/4/05
BLK

TRANSMITTAL LETTER

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

SUBJECT: CIPRIANI LIMO SERVICES, 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: CIPRIAN N. PATRASCU
 Name (Printed or typed)

400 NE 12TH AVE, APT. 205
 Address

HALLANDALE, FL. 33009
 City, State & Zip

954-551-1902
 Daytime Telephone number

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

CIPRIANI LIMO SERVICES, INC.

ATX1

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

FILED

05 MAY -3 PM 2:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

CIPRIANI LIMO SERVICES, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is:

400 NE 12TH AVE, Suite 205
HALLANDALE, FL 33009

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

LIMOUSINE SERVICE

ARTICLE IV SHARES

The number of shares of stock is:

1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

CIPRIAN N. PATRASCU, PRESIDENT
400 NE 12TH AVE APT 205
HALLANDALE, FL. 33009

ARTICLE VI REGISTERED AGENT

The **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:


CIPRIAN N. PATRASCU
400 NE 12TH AVE , APT. 205
HALLANDALE, FL. 33009

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

CIPRIAN N. PATRASCU
400 NE 12TH AVE, APT. 205
HALLANDALE, FL. 33009

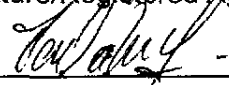
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

04/28/05

Date



Signature/Incorporator

04/28/05

Date