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COVER LETTER

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

SUBJECT: IM	OERIAL TRANSPOR	TATION C	PROTE	ECTIVE	SERVICES	Cori
	(PROPOSED CORPO	RATE NAME –]	MUST INCL	UDE SUFFIX		
Enclosed are an orig	ginal and one (1) copy of the	articles of incorp	poration and	a check for:		
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status		ee ied Copy	\$87.50 Filing Fe Certified & Certifi Status PY REQUI	e, Copy cate of	
FROM:	MICHAEL C	- NE COLE	STTOS	<u> </u>		
	PO Box				-	
	DAVIE, F	-	555	<u> </u>		
	(954) 47	S - 0651	nor .		-	

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

In compliance with Chapter 607 and/or Chapter 621	, F.S. (Profit)		
ARTICLE I NAME The name of the corporation shall be:	i. 00		CORPORTION
IMPERIAL TRANSPORTATION	Y PROTECTIVE	SERVICES	Coklaiditer
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: P.O. BOX 550353 DANIE, PL 33355		SECRE ANAS	FILED SEP 26 M
ARTICLE III PURPOSE The purpose for which the corporation is organized TRANSPORTATION FOR HIR		SET TI OF WA	FILED BY 8: 43 SEP 26 BY 8: 43
ARTICLE IV SHARES The number of shares of stock is:	<u>.</u>		
ARTICLE V INITIAL OFFICERS AND/O List name(s), address(es) and specific title(s):			
VANESSA NECOLETTOS	MICHAEL C. 1		
13850 SW 18 CT.	13850 24 18		
DAVIE, FL 33325	DAVIE, PL		
PRESIDENT	VICE - PRESIDE	アナ	
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NO	T acceptable) of the reg	istered agent is:	
MICHAEL NECOLETTOS	• /	· ·	
13850 SW 18 CT			
DAVIE, FL 33325			
ARTICLE VII INCORPORATOR			
The <u>name and address</u> of the Incorporator is:			
MICHAEL NETOLETTES			
13850 SW 18 CT DAVIE, FC 33375	_		
OAUIE FC 3334	` :*********	******	****
Having been named as registered agent to accept service of pacertificate, I am familiar with and accept the appointment as re			designated in this
mahoultis	·	9/22/09	5
Signature/Registered Agent		'Date	

ARTICLES OF INCORPORATION