

PO6000003587

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

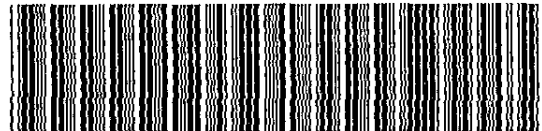
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

06 JAN -9 AM 9:37

J. Shivers JAN 10 2005

**COVER LETTER**

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

**SUBJECT:** TAITA TRANS 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:** EVARISTO MAIDANA

Name (Printed or typed)

34470 CEDARFIELD DRIVE

Address

DADE CITY, FLORIDA 33523

City, State & Zip

352-583-4593

Daytime Telephone number

**FILED**  
**06 JAN -9 AM 9:37**  
**SECRETARY OF STATE**  
**TALLAHASSEE, FLORIDA**

**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:

TAITA TRANS INC

### **ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

34470 CEDARFIELD DRIVE  
DADE CITY, FL. 33523

### **ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

NEW BUSINESS

### **ARTICLE IV SHARES**

The number of shares of stock is:

100

### **ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

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

EVARISTO MAIDANA, 34470 CEDARFIELD DRIVE, DADE CITY, FL. 33523

### **ARTICLE VI REGISTERED AGENT**

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

EVARISTO MAIDANA, 34470 CEDARFIELD DRIVE, DADE CITY, FL. 333523

### **ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

EVARISTO MAIDANA, 34470 CEDARFIELD DRIVE, DADE CITY, FL. 33523

\*\*\*\*\*

*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

  
\_\_\_\_\_  
Signature/Incorporator

JANUARY 6, 2006

Date

JANUARY 6, 2006

Date

FILED  
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA