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07 JUN 21 AM 9:42

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*[Handwritten signature]*

## COVER LETTER

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

SUBJECT: SW FLORIDA DRIVING SCHOOL

(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: ALAIN HECTOR

Name (Printed or typed)

1066 HALBY AVE. S

Address

LEHIGH ACRES FL 33936

City, State & Zip

239-362-5253

Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 7, 2007

ALAIN HECTOR  
1066 HALBY AVE. S  
LEHIGH ACRES, FL 33936

SUBJECT: SW FLORIDA DRIVING SCHOOL  
Ref. Number: W07000027165

We have received your document for SW FLORIDA DRIVING SCHOOL and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

Please return 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 850-245-6052.

Paisley A Alford  
New Filing Section  
Division of Corporations

Letter Number: 907A00038909

**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:

SW FLORIDA DRIVING SCHOOL, **INC.**

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

3620 EVANS AVE  
FORT MYERS FL 33936

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

PROFIT

**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):

ALAIN HECTOR 1066 HALBY AVE S LEHIGH ACRES FL 33936 DIRECTOR  
CERES M. JACQUES 15682 ANGELICA DR ALVA FL 33920 OFFICER  
ANNIE LOUISSAINT 1066 HALBY AVE S LEHIGH ACRES FL 33936 OFFICER

**ARTICLE VI REGISTERED AGENT**

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

ALAIN HECTOR 1066 HABLBY AVE S LEHIGH ACRES FL 33936  
CERES M. JACQUES 15682 ANGELICA DR ALVA FL 33920  
ANNIE LOUISSAINT 1066 HALBY AVE S LEHIGH ACRES FL 33936

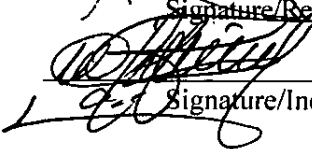
**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

CERES M. JACQUES 15682 ANGELICA DR ALVA FL 33920  
ANNIE LOUISSAINT 1066 HALBY AVE S LEHIGH ACRES FL 33936

\*\*\*\*\*  
*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

05/11/07  
Date

05/11/07  
Date

FILED  
07 JUN 21 AM 9:42  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA