

P08000019735

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

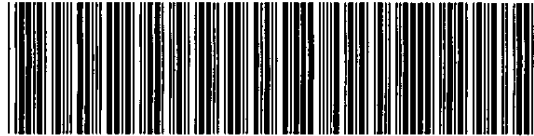
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

W08-7814

Office Use Only



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02/12/08--01035--019 \*\*87.50

2008 FEB 22 PM 4:25  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

T. Burch FEB 25 2008

## COVER LETTER

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

SUBJECT: RN Transportation Corp.  
(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: Rafael Rodriguez  
Name (Printed or typed)

5140 NW 4<sup>th</sup> Street  
Address

Miami, Fl. 33126  
City, State & Zip

(786) 261-8194  
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 13, 2008

RAFAEL RODRIGUEZ  
5140 NW 4TH STREET  
MIAMI, FL 33126

SUBJECT: RN TRANSPORTATION CORP.  
Ref. Number: W08000007814

We have received your document for RN TRANSPORTATION CORP. 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 name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

**Adding "of Florida" or "Florida" to the end of a name is not acceptable.**

Please return the corrected 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) 245-6928.

Tim Burch  
Regulatory Specialist II  
New Filing Section

Letter Number: 408A00009464

**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:

Silvio Transportation, Corp.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

5140 NW 4th Street.  
Miami, Fl. 33126.

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Freight Transportation

**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):

President (P) Rafael Rodriguez  
5140 NW 4th Street  
Miami, FL. 33126

Vice Pres. (VP) Silvio Albello  
1612 Willard Avenue  
Lehigh Acres, Fl. 33472

**ARTICLE VI REGISTERED AGENT**

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

Rafael Rodriguez  
5140 NW 4th Street  
Miami, FL. 33126

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Rafael Rodriguez  
5140 NW 4th Street  
Miami, FL. 33126

\*\*\*\*\*  
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

02/21/2008

Date

02/21/2008

Date

FILED

2008 FEB 22 PM 4:25

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA