

P08000049442

(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

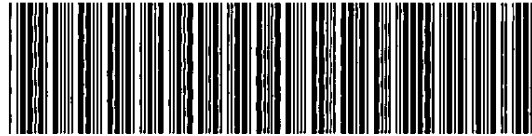
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2008 MAY 16 AM 8:10

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

cf. 5-19

COVER LETTER

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

SUBJECT: ORLANDO LIO TRANSPORTATION, 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 ☒ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status
ADDITIONAL COPY REQUIRED

FROM: LIONEL ORIGENE
Name (Printed or typed)

P.O BOX 592393
Address

ORLANDO, FL 32859
City, State & Zip

(407) 729-6079
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 1, 2008

LIONEL ORIGENE
P.O. BOX 592393
ORLANDO, FL 32859

SUBJECT: ORLANDO LIO TRANSPORTATION, INC.
Ref. Number: W08000022078

We have received your document for ORLANDO LIO TRANSPORTATION, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The Florida Statutes require an entity to designate a street address for its principal office address. A post office box is not acceptable for the principal office address. The entity may, however, designate a separate mailing address. The mailing address may be a post office box.

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) 245-6047.

Carolyn Lewis
Regulatory Specialist II
New Filing Section

Letter Number: 708A00027672

COVER LETTER

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

SUBJECT: ORLANDO LIO TRANSPORTATION, 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 ☒ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: ORLANDO LIO TRANSPORTATION
Name (Printed or typed)

P.O BOX 592393
Address

ORLANDO, FL 32859
City, State & Zip

(407) 729-6079
Daytime Telephone number

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:

ORLANDO LIO TRANSPORTATION, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

123 OWENSHIRE CIR, KISSIMME, FL 34744

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

FOR 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):

LIONEL ORIGENE, 123 OWENSHIRE CIR, KISSIMMEE, FL 34744, PRESIDENT

ROSARIO ORIGENE, 123 OWENSHIRE CIR, KISSIMMEE, FL 34744, SECRETARY

ARTICLE VI REGISTERED AGENT

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

YVES ALTIDOR, 1510 W MICHIGAN ST, ORLANDO, FL 32805

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

LIONEL ORIGENE, 123 OWENSHIRE CIR, KISSIMMEE, FL 34744

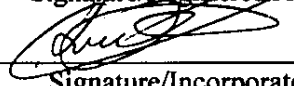
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

05/13/2008

Date



Signature/Incorporator

05/13/2008

Date

FILED

2008 MAY 16 AM 8:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA