

PO9000030877

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

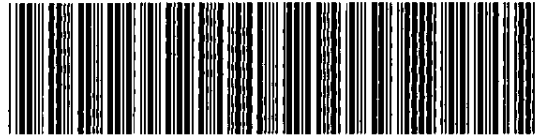
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



000145267680

03/11/09--01020--021 **78.75

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2009 APR -1 P 1:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

W09000012315

COVER LETTER

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

SUBJECT: GMC Transportation Company

(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: _____
Gabriel Motta Capra
Name (Printed or typed)

_____ 8665 Boca Glades Blvd W #A
Address

_____ Boca Raton, Florida 33434
City, State & Zip

_____ (954) 837-3309
Daytime Telephone number

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TALLAHASSEE, FLORIDA
SECRETARY OF STATE

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 17, 2009

GABRIEL MOTTA CAPRA
8665 BOCA GLADES BLVD. W #A
BOCA RATON, FL 33434

SUBJECT: GMC TRANSPORTATION COMPANY
Ref. Number: W09000012315

We have received your document for GMC TRANSPORTATION COMPANY 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 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) 245-6062.

Eula Peterson
Regulatory Specialist II
New Filing Section

Letter Number: 709A00008964

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:

LC Car Service Company

ARTICLE II PRINCIPAL OFFICE

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

8665 Boca Glades Blvd W #A
Boca Raton-FL
33434

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Provide transportation of individuals from one point to another.

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):

Gabriel Motta Capra - President

ARTICLE VI REGISTERED AGENT

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

Gabriel Motta Capra
8665 Boca Glades Blvd W #A
Boca Raton - FL
33434

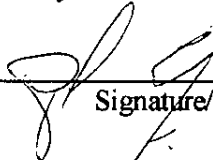
ARTICLE VII INCORPORATOR

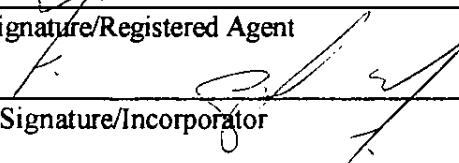
The name and address of the Incorporator is:

Gabriel Motta Capra
8665 Boca Glades Blvd W #A
Boca Raton - FL
33434

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

03/05/2009

Date

03/05/2009

Date