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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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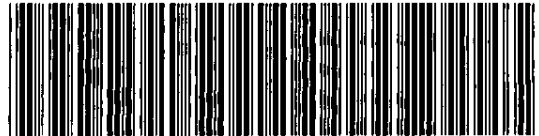
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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10 MAR -8 PM 12:02

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3-10-10

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COVER LETTER

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

SUBJECT: Lovette Transportation Service Corporation
(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: Ann L. Flowers
Name (Printed or typed)

6204 Fox Quarry Lane
Address

Sanford, Florida 32773
City, State & Zip

407. 535. 6219
Daytime Telephone number

lovette.001@gmail.com
E-mail address: (to be used for future annual report notification)

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 25, 2010

ANN L. FLOWERS
6204 FOX QUARRY LANE
SANFORD, FL 32773

SUBJECT: LOVETTE TRANSPORTATION SERVICE, INC.
Ref. Number: W10000009620

We have received your document for LOVETTE TRANSPORTATION SERVICE, INC. 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 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.

The document must contain a registered agent with a Florida street address and a signed statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

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) 245-6869.

Christine Haney
Senior Clerk
New Filing Section

Letter Number: 410A00004707

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10 MAR -8 PM 3:54

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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:

Lovette Transportation Service, Inc.

ARTICLE II PRINCIPAL OFFICE

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

6204 Fox Quarry Lane
Sanford, Florida 32773

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To Transport
individuals with disabilities.

ARTICLE IV SHARES

The number of shares of stock is: 100 shares

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box) Ann L. Flowers

6204 Fox Quarry Lane
Sanford, Florida 32773

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is: Ann L. Flowers

6204 Fox Quarry Lane
Sanford, Florida 32773

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

Ann L. Flowers-6204 Fox Quarry Lane Sanford FL 32773 Feb 22, 2010
Signature/Registered Agent Date

Ann L. Flowers
Signature/Incorporator Date Feb 22, 2010

FILED
10 MAR -8 PM 12:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA