# P10000030773

(Requestor's Name)				
(Address)				
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(City/State/Zip/Phone #)				
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PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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SECRETARY OF STATE
AND ANASSEE. FLORIDA

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w:10000015968

# **COVER LETTER**

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

SUBJECT: Gold Tr	ansportation Services Inc			
		ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)	
Enclosed are an orig	inal and one (1) copy of the art	icles 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 CO	ADDITIONAL COPY REQUIRED	
	on C. Goldstein Name	e (Printed or typed)		
451		Address		
Spri	nghill, Fl 34607 City,	State & Zip		
352-	590-5830			
	Daytime T	elephone number		
jasor	n.goldstein@rocketmail.com			
<del></del>	E-mail address: (to be used	d for future annual report n	otification)	

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



RECEIVED 10 APR -8 AM II: 22

# FLORIDA DEPARTMENT OF STATE PARTMENT OF STATE Division of Corporations JAULAHASSEE, FLORIDA

March 31, 2010

JASON C. GOLDSTEIN 4319 RIVER BIRCH DR. SPRINGHILL, FL 34607

SUBJECT: GOLD TRANSPORTATION SERVICES INC.

Ref. Number: W10000015968

We have received your document for GOLD TRANSPORTATION SERVICES INC. and check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

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: 210A00007933

# **COVER LETTER**

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

SUBJECT: GOLD	TRANSPORTATION SERVICES	INC.	
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an or	iginal and one (1) copy of the art	icles of incorporation and	a check for:
\$70.00 Filing Fee	•	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate o Status
		ADDITIONAL CO	
_	ASON C. GOLDSTEIN Name	e (Printed or typed)	
		Address	
s	PRINGHILL, FL 34607	O. 4 6 7.	
	City,	State & Zip	
<u>35</u>	52-592-5830		
	Daytime 1	elephone number	
ĄL	SON.GOLDSTEIN@ROCKETMA	L.COM	
	E-mail address: (to be use	d for future annual report	notification)

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:

Gold Transportation Service's Inc

### ARTICLE II PRINCIPAL OFFICE

The principal <u>street</u> address and mailing address, if different is: 4319 River Birch Dr

Springhill, FL f34607

### 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):

Jason C.

President&CEO 4319 River Birch Springhill, FL

Goldstein

Dr

3460**7** 

### ARTICLE VI REGISTERED AGENT

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

Jason C. Goldstein

4319 River Birch Dr

Springhill, FL 34607

### ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Jason C. Goldstein

4319 River Birch Dr

Springhill, FL 34607

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/Incomporator

Date

+

Date