

PI10000014571

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

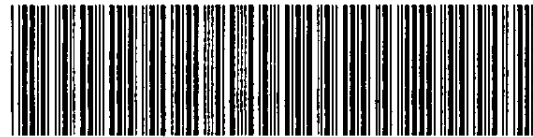
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

MD 2/11

## COVER LETTER

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

SUBJECT: TRANSCONTINENTAL OF U.S.A, 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 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: NOEL E. ESCOBAR SR- ACCOUNTANT  
Name (Printed or typed)

4420 SW 77TH AVENUE  
Address

DAVIE, FLORIDA 33328  
City, State & Zip

954-474-5425  
Daytime Telephone number

NESCO1@AOL.COM  
E-mail address: (to be used for future annual report notification)

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

DANL W. JONES  
4420 SW 77<sup>TH</sup> AVENUE  
DAVIE, FLORIDA 33328  
PHONE 954-763-7339

FILED  
11 FEB -9 AM 11:38  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

February 3, 2011

Department of State  
Division of Corporation  
New Filing Section  
409 East Gaines Street  
Tallahassee, Florida 32314

Gentlemen:

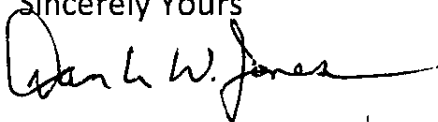
Subject: TRANSCONTINENTAL OF USA, INC  
Corp Document Number# P00000056158

" AFIDAVIT "

Gentlemen:

I hereby put the Division of Corporation in notice that I have no intentions to  
Reinstate the above Corporate Doc # P00000056158 and I hereby release the  
name to be used again.

Sincerely Yours



Danl W. Jones

**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: **TRANSCONTINENTAL OF U.S.A., INC.**

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
**1000 SOUTH DIXIE HWY EAST  
POMPANO BEACH, FL 33060**

Mailing address, if different is:  
**4420 SW 77TH AVENUE  
DAVIE, FLORIDA 33328**

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

**TO ENGAGE IN AND TO TRANSACT ANY OR ALL LAWFULL BUSINESS FOR WHICH  
CORPORATIONS MAY BE INCORPORATED UNDER THE LAWS OF THE STATE OF  
FLORIDA.**

**ARTICLE IV SHARES**

The number of shares of stock is: **500**

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: **DANL W. JONES-PRESIDENT**  
Address: **4420 SW 77TH AVENUE  
DAVIE, FLORIDA 33328**

Name and Title: **DANL W. JONES-SECRETARY**  
Address: **4420 SW 77TH AVENUE  
DAVIE, FLORIDA 33328**

Name and Title: **DANL W. JONES-VICE PRESIDENT**  
Address: **4420 SW 77TH AVENUE  
DAVIE, FLORIDA 33328**

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

Name and Title: **DANL W. JONES-TREASURER**  
Address: **4420 SW 77TH AVENUE  
DAVIE, FLORIDA 33328**

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

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

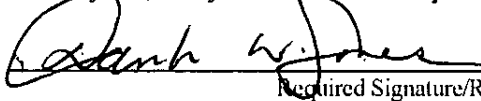
Name: **DANL W. JONES**  
Address: **4420 SW 77TH AVENUE  
DAVIE, FLORIDA 33328**

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

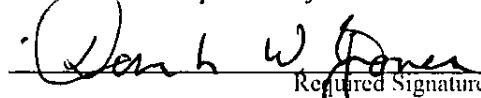
Name: **DANL W. JONES**  
Address: **4420 SW 77TH AVENUE  
DAVIE, FLORIDA 33328**

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

  
Required Signature/Registered Agent

**FEBRUARY 3, 2011**  
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

  
Required Signature/Incorporator

**FEBRUARY 3, 2011**  
Date

**FILED**  
**11 FEB -9 AM 11:38**  
**SECRETARY OF STATE**  
**TALLAHASSEE, FLORIDA**