

P110000028527

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SC 3/28

COVER LETTER

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

SUBJECT: SANFORD ORLANDO DISNEY 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 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: MARIUS STUPARU
Name (Printed or typed)

517 BATTERSEA AVENUE
Address

DELTONA FLORIDA 32738
City, State & Zip

CELL 407-562-6700
Daytime Telephone number

mariusstuparu@YAHOO.COM
E-mail address: (to be used 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, SANFORD ORLANDO DISNEY TRANSPORTATION INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

517 BATTERSEA AVENUE
DELTONA FL. 32738

Mailing address, if different is:

N/A

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO IMPROVE THE BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: 1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: MARIUS STUPARU PRESIDENT Name and Title: N/A

Address: 517 BATTERSEA AVENUE Address:
DELTONA FL. 32738

Name and Title: N/A

Address:

Name and Title: N/A

Address:

Name and Title: N/A

Address:

Name and Title: N/A

Address:

ARTICLE VI REGISTERED AGENT

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

Name: MARIUS STUPARU

Address: 517 BATTERSEA AVENUE
DELTONA, FL 32738

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: MARIUS STUPARU

Address: 517 BATTERSEA AVENUE
DELTONA FL. 32738

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

Marius Stuparu

Required Signature/Registered Agent

3/18/11

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.

Marius Stuparu

Required Signature/Incorporator

3/18/11

Date