P11000037112

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT	MAIL
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of State	\$
Special Instructions to Filing Officer:	

Office Use Only

6229 W11000017734



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COVER LETTER

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

14114143500, 1 E 32314	
SUBJECT: Florida VIP Transportati	ion Inc e name – <u>must include suffix</u>)
Enclosed are an original and one (1) copy of the article	es of incorporation and a check for:
\$70.00 \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED
FROM: Jorge E Triana	Printed or typed)
2216 Laurel Pine Ln	idress
Orlando, FL 32837	tate & Zip
407-668-5866 Daytime Tel	ephone number

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

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

DIVISION OF CONFIDENTIAL



March 29, 2011

JORGE E TRIANA 2216 LAUREL PINE LN ORLANDO, FL 32837

SUBJECT: FLORIDA VIP TRANSPORTATION INC.

Ref. Number: W11000017734

We have received your document for FLORIDA VIP TRANSPORTATION 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):

Florida law requires the street address of the principal office and, if different the mailing address of the entity. A post office box is not acceptable for the principal office.

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) 245-6973.

Claretha Golden Regulatory Specialist II New Filing Section

Letter Number: 811A00007596



ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

The name of the	Ecorporation shall be:	- Company in the Co	
ADTICL IN IT		DIVISION OF CORPORATE	iş.
ARTICLE II	PRINCIPAL OFFICE Principal street address	Mailing ad ABA A PRoject is PM 3: (
	2216 Laurel Pine Ln	tatening and that all the telephone is L. U. 2. f	13
	Orlando, Fl 32837		_
470000000000000000000000000000000000000	nima.ca		-
The purpose for	r which the corporation is organized is:		
Local Trans			
ARTICLE IV The number of s	SHARES shares of stock is: 1,500		
ARTICLE V	INITIAL OFFICERS AND/OR DIRE	CTORS	
Name and	l Title:		_
Address:		Address:	_
			-
			_
Name and		Name and Title:	_
Address:		Address:	_
			-
			_
Name and	l Title:	Name and Title:	_
Address:		Address:	_
			
			- ,
	REGISTERED AGENT		1
	Florida street address (P.O. Box NOT accept	able) of the registered agent is:	
Name:	Jorge E Triana		
Address:	2216 Laurel Pine Ln Orlando, FL 32837		
	Qualito, FL 32037		
	INCORPORATOR		
	address of the Incorporator is:		
Name:	Jorge E Triana		
Address:	2216 Laurel Pine Ln Orlando, FL 32837		
	Wildling, L. Deou		
Having been no	yded as registered agent to accept service of	process for the above stated corporation at the place designated	l in
this certificate	am familiar with and accept the appointmen	as registered agent and agree to act in this capacity	
10		011/00/11	
70	Required Signature/Registered Age	<u> </u>	_
1) 1	Required Signature/Registered Age	nt Date	
I submit this do	ocument and affirm that the facts stated her	ein are true. I am aware that the false information submitted i	n a
	Department of State constitutes a third degree		
1.	a = a.	'	
Fage	Required Signature/Incorporato	- 04/08/11	_
7	Réquired Signature/Incorporato	Date	