

P11000052348

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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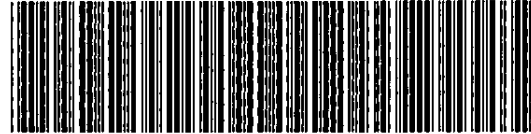
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2011 JUN -2 PM 4:48
SECRETARY OF STATE
HALLMARKS, FLORIDA

T. Burch JUN 8 2011

COVER LETTER

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

SUBJECT: Reliable & Dependable Transportation Co.
(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: Sherri Dixon
Name (Printed or typed)

7777 Normandy Blvd
Address

Jacksonville FL 32221 Apt 601
City, State & Zip

305 450-7111
Daytime Telephone number

scdixon@att.net
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: Reliable & Dependable Transportation Co.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

7777 Normandy Blvd
Jacksonville FL 32221 Apt 601

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To provide safe and reliable transportation
to all passengers

ARTICLE IV SHARES

The number of shares of stock is: 1 share @ par value \$1.00

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Sherri Dixon (President)
Address: 7777 Normandy Blvd
Jacksonville FL 32221 Apt 601

Name and Title: _____
Address: _____

Name and Title: Mark Dixon (Vice President)
Address: 7777 Normandy Blvd
Jacksonville FL 32221 Apt 601

Name and Title: _____
Address: _____

Name and Title: Curtis Cunningham (Secretary)
Address: 4573 Wandering Oaks Ct
Jacksonville FL 32257

Name and Title: _____
Address: _____

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TALLAHASSEE, FL 32301
STATE OF FLORIDA
DEPARTMENT OF STATE

ARTICLE VI REGISTERED AGENT

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

Name: Sherri Dixon
Address: 7777 Normandy Blvd
Jacksonville FL 32221 Apt 601

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Sherri Dixon
Address: 7777 Normandy Blvd
Jacksonville FL 32221 Apt 601

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

Sherri Dixon
Required Signature/Registered Agent

5-31-2011
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.

Sherri Dixon
Required Signature/Incorporator

5-31-2011
Date