

P11000072014

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

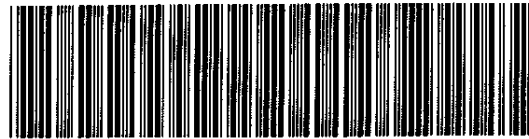
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



300210813663

08/10/11--01008--004 \*\*70.00

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATION  
2011 AUG 10 AM 11:52

gr 8/11/11

## COVER LETTER

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

SUBJECT: TAXI DIANA 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: ARISTEO CERVENTES

Name (Printed or typed)

440 FAIRWOOD AVE #122

Address

CLEARWATER, FL 33759

City, State & Zip

727-692-4353

Daytime Telephone number

NONE

E-mail address: (to be used for future annual report notification)

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

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
2011 AUG 10 AM 11:52

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: TAXI DIANA INC

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATION

2011 AUG 10 AM 11:52

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
440 FAIRWOOD AVE #122  
CLEARWATER, FL 33759

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:  
ANY AND ALL THAT IS LEGAL

**ARTICLE IV SHARES**

The number of shares of stock is: 1,000

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

Name and Title:	ARISTEO CERVENTES, PST	Name and Title:	
Address:	440 FAIRWOOD AVE #122 CLEARWATER, FL 33759	Address:	

Name and Title:		Name and Title:	
Address:		Address:	

Name and Title:		Name and Title:	
Address:		Address:	

**ARTICLE VI REGISTERED AGENT**

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

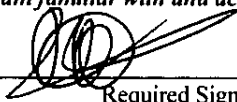
Name: ARISTEO CERVENTES  
Address: 440 FAIRWOOD AVE #122  
CLEARWATER, FL 33759

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: ARISTEO CERVENTES  
Address: 440 FAIRWOOD AVE #122  
CLEARWATER, FL 33759

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

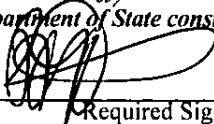


Required Signature/Registered Agent

8-8-2011

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

8-8-2011

Date