

11000108083

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

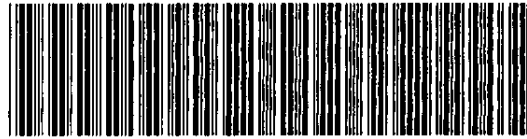
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700214730237

12/05/11--01018--018 **70.00

2011 DEC 22 AM 10:36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

J. Shivers DEC 27 2011

W11-61064
691

COVER LETTER

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

SUBJECT: Dollar Shuttle 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: Jorge G. Ramos

Name (Printed or typed)

505 SE 16th St.

Address

Fort Lauderdale, FL 33316

City, State & Zip

954-205-0690

Daytime Telephone number

allserviceshuttle@gmail.com

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2011 DEC 22 AM 10:36

FILED

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

Dollar Shuttle Inc.

The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal street address

505 SE 16th St.
Fort Lauderdale, FL 33316

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
Shuttle Service.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Jorge G. Ramos - President
Address: 505 SE 16th St.
Fort Lauderdale, FL 33316

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

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: Jorge G. Ramos
Address: 505 SE 16th St.
Fort Lauderdale, FL 33316

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Jorge G. Ramos
Address: 505 SE 16th St.
Fort Lauderdale, FL 33316

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

Jorge G. Ramos
Required Signature/Registered Agent

11/30/2011

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.

Jorge G. Ramos
Required Signature/Incorporator

11/30/2011

Date

Effective Date is 1/1/2012

FILED
2011 DEC 22 AM 10:36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA