

P12000019731

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

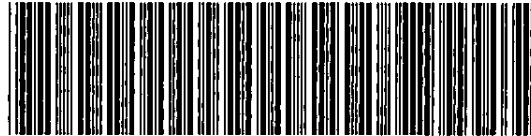
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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12 FEB 27 PM 3:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED FEB 28 2012

COVER LETTER

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

SUBJECT: Divine Mercy Transport 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: collins peterson

Name (Printed or typed)

3272 nw 104th ave

Address

coral springs fl 33065

City, State & Zip

9548561270

Daytime Telephone number

divinemercytransport714@gmail.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

Divine Mercy Transport Inc

The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal street address
3272 nw 104th ave
coral springs fl 33065

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
professional corporation for profit

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: collins peterson-president
Address: 3272 nw 104th ave
coral springs fl 33065

Name and Title: maribel garcia-treasurer
Address: 3272 nw 104th ave
coral springs fl 33065

Name and Title: maribel garcia-vice president
Address: 3272 nw 104th ave
coral springs fl 33065

Name and Title: _____
Address: _____

Name and Title: collins peterson
Address: 3272 nw 104th ave
coral springs fl 33065

Name and Title: _____
Address: _____

ARTICLE VI REGISTERED AGENT

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

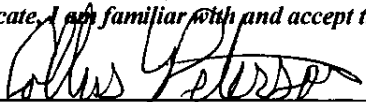
Name: collins peterson
Address: 3272 nw 104th ave
coral springs fl 33065

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: maribel garcia
Address: 3272 nw 104th ave
coral springs fl 33065

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

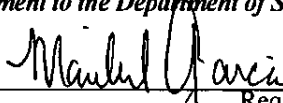


Required Signature/Registered Agent

2/23/12

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

2/23/12

Date

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TALLAHASSEE, FLORIDA