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1. BINNETS APR 0 9 2012



FLORIDA DEPARTMENT OF STATE Division of Corporations

March 26, 2012

GUILLAUINE DESEME 2319 LILY PAD LN KISSIMMEE, FL 34743

SUBJECT: CITY YELLOW CAB LLC

Ref. Number: W12000016861

¥

We have received your document for CITY YELLOW CAB LLC and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

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) 245-6052.

Justin M Shivers Regulatory Specialist II New Filing Section

Letter Number: 412A00010173

COVER LETTER

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

SUBJECT: CT / CPROPOSED COR	llo 1,1 Cab LLC. PORATE NAME-MUST INCLUDE SUFFIX)
Enclosed are an original and one (1) copy of t	he articles 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
1 _{1 .}	
FROM: GUILAUIV	1e Deseme (Printed or typed)
2319 Lily	Name (Printed or typed) Pad Lane Address Name (Printed or typed) APR APR APR APR APR APR APR APR APR AP
Kissimmee	Florida 34743 F 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5
407 3 Days	O 1-7 3 8 7 time Telephone number
111 70 @ City 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 No.	oration shall be: City Yellow	Cab, Inc.	
ARTICLE II P	Principal office Principal street address 3 19 Lily food Jane KISSI Mines Torida 34743	Mailing address, if	different is:
ARTICLE III PI The purpose for which	URPOSE ch the corporation is organized is:		
ARTICLE IV S The number of shares	HARES of stock is:		
ARTICLE V III Name and Title Address:	NITIAL OFFICERS AND/OR DIRECTORS Guillaume Desente Py Nar 3319 Lity Pad fan. Add Kissi min es Et oring 34743	ne and Title: Presid	ent
Name and Title Address:		me and Title: Guillaume dress: 319 liky Kissimm	Deseme Pr. Pad San
Name and Title Address:		ne and Title: Guillaume dress: 3319 Liby Kissinin	Deseme Ri Pad fane ne e 34743
ARTICLE VI R	EGISTERED AGENT		TAC 2
	la street address (P.O. Box NOT acceptable) of the re	gistered agent is:	元 20
Name: Address:	1319 Lity Pad for 34743	;	APR-6 APR-6 AHASSE
ARTICLE VII II			m-
	ss of the Incorporator is:		The same
Name: Address:	Guillaume Desemo 319 Lily Pad Jany Kissimme o Torida 34743		AM D: 31
	as registered agent to accept service of process for to camiliar with and accept the appointment as registered (
Dullou	me Jeseme		18/12
	me Desi em e Required Signature/Registered Agent		Date
	ent and affirm that the facts stated herein are true. State constitutes a third degree felony as present the state of State constitutes a third degree felony as present the state of the		rmation submitted in a
	Required Signature/Incorporator	-7	/Date