

P12000073/21

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

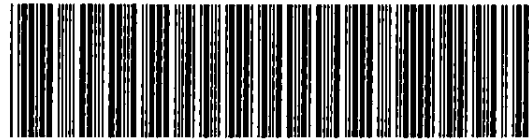
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300238786523

08/24/12--01008--019 **78.75

FILED
12 AUG 24 PM 3:49
CLERK OF DISTRICT COURT
TALLAHASSEE, FLORIDA

K 08/27/12

COVER LETTER

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

SUBJECT: FIVE STAR ELITE DRIVING ACADEMY, IC
(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: FRED PICKETT

Name (Printed or typed)

609 SW 13TH STREET

Address

BELLE GLADE, FL. 33430

City, State & Zip

561-914-8675

Daytime Telephone number

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: **FIVE STAR DRIVING ACADEMY, INC**

ARTICLE II PRINCIPAL OFFICE

Principal street address
1417 NW AVE L UNIT #1
BELLE GLADE FL 33430

Mailing address, if different is:

P.O. BOX 2808
BELLE GLADE FL 33430

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO PROVIDE QUALITY COMPREHENSIVE DRIVING INSTRUCTION TO STUDENTS IN WESTERN PALM BEACH COUNTY.

ARTICLE IV SHARES

The number of shares of stock is **3**

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: **FRED PICKETT (PRESIDENT)**
Address: **609 SW 13 TH STREET**
BELLE GLADE, FL 33430

Name and Title: _____
Address: _____

Name and Title: **ADRIANNA CLARK**
Address: **17021 NORTH BAY RD. UNIT 1019**
MIAMI, FL 33160

Name and Title: _____
Address: _____

Name and Title: **JALISA STEELE**
Address: **8717B DOVELAND DR**
PAHOKEE, FL 33476

Name and Title: _____
Address: _____

ARTICLE VI REGISTERED AGENT

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

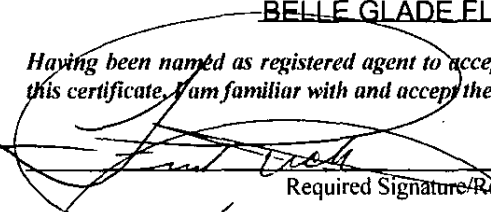
Name: **FRED PICKETT**
Address: **609 SW 13TH STREET**
BELLE GLADE FL 33430

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: **FRED PICKETT**
Address: **609 SW 13TH STREET**
BELLE GLADE FL 33430

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

8/18/12
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

8/18/12
Date

12 AUG 24 PM 3:49
STATE
TALLAHASSEE, FLORIDA