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2 02/28/14

COVER LETTER

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

SUBJECT: Elite Transport Solutions, 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: Shinneka Sands
Name (Printed or typed)

8994 S.W. 206 ST.
Address

Cutler Bay, FL 33189
City, State & Zip

786-853-1504
Daytime Telephone number

elitetransportsolutions@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

The name of the corporation shall be: Elite Transport Solutions Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

8994 S.W. 206th ST
Cutler Bay, FL 33189

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any and all Lawful Business

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Shinneka Sands P Name and Title: Lester Norton VP

Address: 8994 S.W. 206th ST Address: 5605 S.W. 19th ST
Cutler Bay, FL 33189 West Park, FL 33023

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

(cont.)

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: Shinneka Sands
Address: 8994 S.W. 206th ST
Cutter Bay, FL 33189

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Shinneka Sands
Address: 8994 S.W. 206th ST
Cutter Bay, FL 33189

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TALLAHASSEE, FLORIDA

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

Shinneka Sands
Required Signature/Registered Agent

2-20-2014
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.

Shinneka Sands
Required Signature/Incorporator

2-20-2014
Date