

**P15** Florida Department of State  
 Division of Corporations  
 Electronic Filing Cover Sheet **000023991**

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To:

Division of Corporations  
 Fax Number : (850) 617-6381

From:

Account Name : CORP USA  
 Account Number : 072450003255  
 Phone : (305) 634-3694  
 Fax Number : (305) 633-9696

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

**FLORIDA PROFIT/NON PROFIT CORPORATION  
 TAXI CRUISE, INC.**

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

90747

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Corporate Filing Menu

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2015 MAR 11 PM 12:52

SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

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15 MAR 11 PM 2:55

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4

H15000002276

# COVER LETTER

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

SUBJECT: Taxi Cruise, 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: Rochelle MALEK  
Name (Printed or typed)

407 Lincoln Road - Suite 4-C  
Address

MIAMI Beach Florida 33139  
City, State & Zip

305- 538-4431  
Daytime Telephone number

rochelmal@aol.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: TAXI Cruise, Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

740 Alton Road  
MIAMI BEACH, Florida 33139

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: to engage in any legal Business

**ARTICLE IV SHARES**

The number of shares of stock is: 100

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Andrew Roth Name and Title: Pres - Sec. - Treas.

Address: 740 Alton Road Address: \_\_\_\_\_  
MIAMI BEACH, Florida 33139

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

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CLERK OF DISTRICT COURT  
JANUARY 11 2015

(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: Andrew Roth  
Address: 740 Alton Road  
Miami Beach, Florida 33139

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Andrew Roth  
Address: 740 Alton Road  
Miami Beach, Florida 33139

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

[Signature]  
Required Signature/Registered Agent

March 11, 2015  
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.

[Signature]  
Required Signature/Incorporator

March 11, 2015  
Date

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