

P15000053057

(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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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JUN 19 2015
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COVER LETTER

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

SUBJECT: STI TRANSPORTATION INCORPORATED

(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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☒ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status
ADDITIONAL COPY REQUIRED

FROM: HEMRAJ BADREE

Name (Printed or typed)

4201 SW 10TH STREET

Address

PLANTATION, FL 33317

City, State & Zip

954-348-3493

Daytime Telephone number

stitransportinc@yahoo.com

E-mail address: (to be used for future annual report notification)

SECRETARY OF STATE
-TALLAHASSEE, FLORIDA-

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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: STI TRANSPORTATION INCORPORATED

ARTICLE II PRINCIPAL OFFICE

Principal street address

4201 SW 10TH STREET

PLANTATION, FL 33317

Mailing address, if different is:

SAME

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: TRANSPORT AND EQUIPMENT

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: HEMRAJ BADREE, PRESIDENT

Address 4201 SW 10TH STREET

PLANTATION, FL 33317

Name and Title: VISHWANIE TAJRAM, VICE PRES

Address: 4201 SW 10TH STREET

PLANTATION, FL 33317

Name and Title: _____

Address _____

Name and Title: _____

Address: _____

Name and Title: _____

Address _____

Name and Title: _____

Address: _____

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TALLAHASSEE, FLORIDA

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: HEMRAJ BADREE

Address: 4201 SW 10TH STREET

PLANTATION, FL 33317

ARTICLE VII INCORPORATOR

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

Name: HEMRAJ BADREE

Address: 4201 SW 10TH STREET

PLANTATION, FL 33317

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TALLAHASSEE, FLORIDA

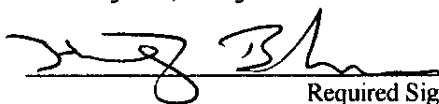
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

6/11/15
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

6/11/15
Date