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15 JUL 27 PM 3:03
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1115-43829 CMD 7/28

COVER LETTER

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

SUBJECT: TDL TRANSPORTATION

(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: DAVID JEAN

Name (Printed or typed)

839 princeton dr

Address

CLERMONT FLO 34711

City, State & Zip

352-321-0121 352-321-0373

Daytime Telephone number

tabernaclelouange36@yahoo.com

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

NOTE: Please provide the original and one copy of the articles.



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 25, 2015

DAVID JEAN
839 PRINCETON DR.
CLERMONT, FL 34711

SUBJECT: TDL TRANSPORTION
Ref. Number: W15000043829

We have received your document for TDL TRANSPORTION 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.

It appears that the word TRANSPORTION in the name of this entity is misspelled. If this misspelling was intentional, simply resubmit the document with the word spelled TRANSPORTION. If you did not misspell this word intentionally, please correct the spelling to read TRANSPORTATION and resubmit the document for processing.

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.

A corporation may not act as its own incorporator. Please designate an individual, another active domestic or foreign corporation, with a street address.

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.

Maryanne Dickey
Regulatory Specialist II
New Filing Section

Letter Number: 715A00013410



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 10, 2015

DAVID JEAN
839 PRINCETON DR.
CLERMONT, FL 34711

SUBJECT: TDL TRANSPORTATION CORPORATION
Ref. Number: W15000043829

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

You failed to make the correction(s) requested in our previous letter.

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.

A corporation may not act as its own incorporator. Please designate an individual, another active domestic or foreign corporation, with a street address.

If you have any further questions concerning your document, please call (850) 245-6052.

Maryanne Dickey
Regulatory Specialist II
New Filing Section

Letter Number: 715A00013410

COVER LETTER

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

SUBJECT: TDL TRANSPORTATION CORPORATION
(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: DAVID JEAN
Name (Printed or typed)

839 PRINCETON DR
Address

CLERMONT FLO
City, State & Zip

352-321-0121 352-321-0373
Daytime Telephone number

tabernacledelouange36@yahoo.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: TDL TRANSPORTATION CORPORATION

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

839 PRINCETON DR CLERMONT FLO 34711

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: TRANSPORTATION FOR STUDENT IN ALSO OTHER THAT
IN THE NEED BECAUSE THEY DO NOT HAVE PUBLIC TRANSPORTATION IN THE AREA OF

ARTICLE IV SHARES

The number of shares of stock is: 3

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: DAVID JEAN PRESIDENT CEO

Name and Title: MARIE JEAN VP

Address 839 PRINCETON DR
CLERMONT FLO 34711

Address: 839 PRINCETON DR
CLERMONT FLO 34711

Name and Title: KERVENS JEAN SECRETARY

Name and Title: _____

Address 1040 SCHOOL STREET
CLERMONT FLO 34711

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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: MARIE JEAN

Address: 839 PRINCETON DR

CLERMONT FLO 34711

ARTICLE VII INCORPORATOR

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

Name: DAVID JEAN

Address: 839 PRINCETON DR

CLERMONT FLO 34711

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 06/16/2015 (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

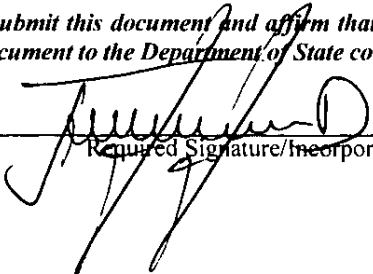


Required Signature/Registered Agent

07/16/2015

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.



Required Signature/Incorporator

07/16/2015

Date

15 JUL 27 PM 3:03