

P15000067307

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(Requestor's Name)

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(Address)

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(Address)

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(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

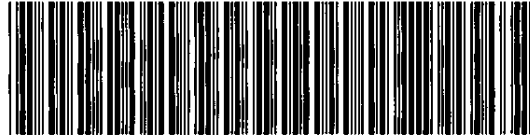
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

AUG 11 2015  
D CUSHING

COVER LETTER

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

RECEIVED AUG 11 2015

SUBJECT: \_\_\_\_\_  
(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: Rodrigue Altidor  
Name (Printed or typed)

880 SW 50 Ave  
Address

MARGate FL. 33068  
City, State & Zip

954-832-6791; 954-709-8196  
Daytime Telephone number

bonneho1@hotmail.com  
E-mail address: (to be used for future annual report notification)

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

or text at 954  
832.6791



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 13, 2015

RODRIGUE ALTIDOR  
ALTI LIMO TRANSPORTATION  
880 SW 50TH AVE  
MARGATE, FL 33068

SUBJECT: ALTI LIMO TRANSPORTATION L.L.C.  
Ref. Number: W15000025324

bonneh01@gmail.com  
or text at  
954 832 6791

We have received your document for ALTI LIMO TRANSPORTATION L.L.C. and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

I had sent out an email on February 2nd which is attached advising you that we could not file your limited liability company at this time. You will notice that there are two emails attached but they both say the same thing but the email address is different by 1 letter. So please make sure we have the correct email address when you return your document if you still want to file this entity with our office.

Please return 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) 245-6050.

Diane Cushing  
Senior Section Administrator

Letter Number: 215A00007232

Hello, I am Rodrigue Altidor, I Just want to open a new (account) Corporation with Hauze Bonnet as Secretary. The best email address that I have is: bonneh01@gmail.com

www.sunbiz.org or text at 954 832 6791

**Cushing, Diane**

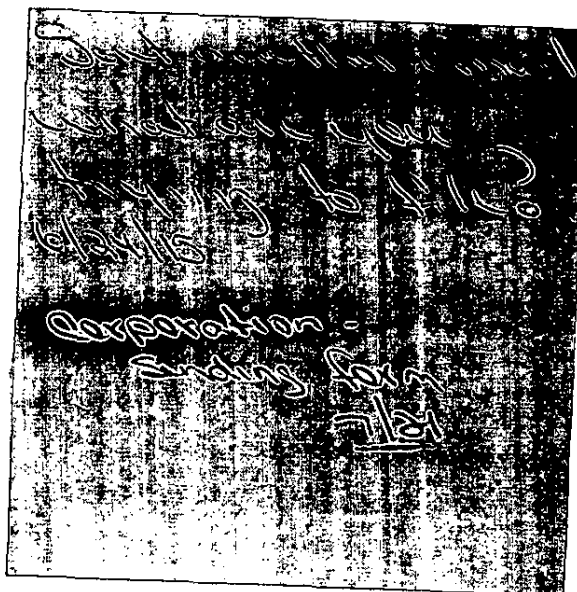
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**From:** Cushing, Diane  
**Sent:** Monday, February 02, 2015 2:50 PM  
**To:** 'rodriguealtidore@yahoo.com'  
**Subject:** FW: Alti Limo Transportation LLC

Mr. Altidor

I am in receipt of your application that you submitted to our office. What you submitted was the conversion form to convert from one entity to another. But it appears the way you completed the forms that you are just trying to file a new Florida Limited Liability Company. Is that correct? If so did you mean to say that you had no managers or authorized members? On the conversion form you have yourself listed as manager and then you have Hanze Bonnet signing as secretary, do you want me to list them on the articles of organization?

*Diane C. Cushing*  
Senior Section Administrator  
Amendment Section  
Division of Corporations  
(850) 245-6913  
(850) 245-6013 (Fax)



Donneho1@gmail.com  
or text/ at 954 832 6791

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: ALTI LIMO TRANSPORTATION, INC

ARTICLE II PRINCIPAL OFFICE

Principal street address

880 SW 50th Ave

MARGATE, FLORIDA

33068

Mailing address, if different is:

The same

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: FOR TRANSPORTATION

ARTICLE IV SHARES

The number of shares of stock is: 1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Altidor, Rodrigue Name and Title: DIRECTOR

Address: 880 SW 50th Ave Address: 7523 SW 8th CT

MARGATE, FL. 33068 N. LAUDERDALE,

FL. 33068

Name and Title: HANZE BONNET Name and Title: SECRETARY

Address: 7523 SW 8th CT Address: Same

N. LAUDERDALE,

FL. 33068

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

Address: \_\_\_\_\_ 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: Hanze BONNET  
Address: 7523 SW 8th CT  
N. LAUDERDALE, FL 33068

**ARTICLE VII INCORPORATOR**

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

Name: Rodrigue Altidor  
Address: 880 SW 50th AVE  
MAR OATE, FL 33068

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TALLAHASSEE, FLORIDA

**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: Same day as 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

Rodrigue Altidor  
Required Signature/Registered Agent

7/30/15  
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.

Rodrigue Altidor  
Required Signature/Incorporator

7/30/15  
Date