Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H190002862043)))



H190002862043ABC%

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.

Doing so will generate another cover sheet.

To:			(2)	\sim
	Division of Corporations			19
	Fax Number	: (850)617-6381		2019 SEP
From:			•	P 2
	Account Name	: LAZARUS CORPORATE FILING SERVICE, INC.	•	<u>+</u>
	Account Number	: 120000000019		_
	Phone	: (305)552-5973		H
	Fax Number	: (305)675-5944		=
				N
PEnter 1	the email address	s for this business entity to be used for	future	_
ann	ual report maili	ngs. Enter only one email address please.	**	
Ema	il Address:			
		· · · · · · · · · · · · · · · · · · ·	_	

FLORIDA PROFIT/NON PROFIT CORPORATION STUDENTS TRANSPORT INC.

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

S TALLENT SEP 2 5 2019 09/24/2019 15:28 3052201440

ARTICLES OF INCORPORATION In compliance with Chapter 607 (Profit)

ARTICLE | NAME: The name of the corporation is

- To find of the corporation is:		
Students Transport Inc-		
ARTICLE II PRINCIPAL OFFICE:	_	
The principal street address and mailing address is:		
16952 SW. 152 AVE. Viami FL 33187		
ARTICLE III SHARES: The number of shares of stock is: 100		
ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:		
German Mandilego (P)	2019 S	1-12 <u>7</u> -
	SEP 24	[1-13 2-14 1
	A	[8
	II: 20	-
ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:		
The name and Florida street address (PO Box not acceptable) of the registered agent is:		
16952 SW 152 Ave.		
MIQMI FL 33187		
ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:		
German Mandilego		
10952 SW 152 Ave.		
Migmi FL 32187		

Required Signatures:

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

Registered Agent

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.

Incorporator inte