

**P19000093974**

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To:

Division of Corporations  
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**\*\*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  
AIRPORT SHUTTLE SERVICES, INC.**

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$78.75

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*JS*  
*Dec 20, 2019*

## **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:

**AIRPORT SHUTTLE SERVICES, INC.**

### **ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

Principal street address:

2766 NW 62 St.  
Miami, FL 33147

Mailing address, if different:

2766 NW 62 St.  
Miami, FL 33147

### **ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Any and all lawful business

### **ARTICLE IV SHARES**

The number of shares of stock is:

1,000 shares authorized, 100 shares issued and outstanding

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

List name(s), address (es) and specific titles(s):

Name and Title: **Nicolas Maggio, President/Secretary**  
Address **13128 SW 3 St.**  
**Miami, FL 33184**

Name and Title:  
Address

Name and Title:  
Address

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agents is:

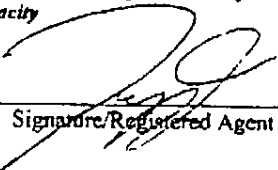
Name: Nicolas Maggio  
Address: 13128 SW 3 St.  
Miami, FL 33184

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

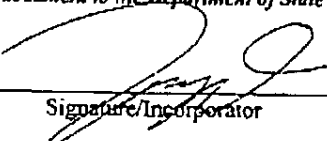
Name: Nicolas Maggio  
Address: 13128 SW 3 St.  
Miami, FL 33184

\*\*\*\*\*  
*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/Registered Agent

12/19/19  
\_\_\_\_\_  
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/Incorporator

12/19/19  
\_\_\_\_\_  
Date