

P22000034831

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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.

((H22000169557 3)))



H220001695573ABC4

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:  
Division of Corporations  
Fax Number : (850)617-6381

From:  
Account Name : LAZARUS CORPORATE FILING SERVICE, INC.  
Account Number : I20000000019  
Phone : (305)552-5973  
Fax Number : (305)675-5944

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: \_\_\_\_\_

RECEIVED  
2022 MAY 11 PM 4:06  
CORPORATIONS  
COMMERCIAL  
SERVICES

FLORIDA PROFIT/NON PROFIT CORPORATION  
PREMIER CLIENT TRANSPORTATION CORP

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

22 MAY 11 AM 3:16  
STATE OF FLORIDA  
DIVISION OF CORPORATIONS

S. CHATHAM  
MAY 12 2022

**ARTICLES OF INCORPORATION**  
In compliance with Chapter 607 (Profit)

**ARTICLE I NAME:** The name of the corporation is:

Premier Client Transportation CORP

**ARTICLE II PRINCIPAL OFFICE:**

The principal street address and mailing address is:

852 Everglades Blvd S Naples FL 34117

**ARTICLE III SHARES:** The number of shares of stock is: 100

**ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:**

Miguel Ochoa (President)  
José Angel Lorenzo (Vice President)

**ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:**

The name and Florida street address (PO Box not acceptable) of the registered agent is:

Miguel Ochoa  
1816S Dupont Drive Fort Myers FL 33967

**ARTICLE VI INCORPORATOR:** The name and address of the Incorporator is:

Miguel Ochoa  
1816S Dupont Drive Fort Myers FL 33967

22 MAY 11 AM 3:16  
OFFICE OF THE CLERK  
STATE OF FLORIDA

**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	5/10/22 _____ 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.

 _____ Incorporator	5/10/22 _____ Date
---	--------------------------

STATE OF FLORIDA  
 DIVISION OF CORPORATIONS  
 22 MAY 11 AM 3:16