P95000026492

TRANSMITTAL LETTER RECEIVED

95 APR - 1 111 9: 45

.. /ICIDH OF COMPORATION

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

> 7000001446767 -04/04795-00027-0057 -+++122.50 *+++122.50

	,	Toposco corporato	marria - Must Micidio 20	ш		
Enclos	sed is an origina	I and one (1) co	ppy of the articles o	f incorporation	and a chec	:k
	\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	\$122.50 Filing Fee & Certified Copy	\$131.25 Filing Fee, Certified Copy & Certificate		
			Additional Cop	y Required		2 mg
	FROM:	SANFORD I	. STEINMAN (printed or typed)	· ·		
		11530 РН]	LLIPS HIGHWAY		; 20	
		JACKSONVI	Address	32256		
			y, State & Zip		1/0	
	X		-3770		· Pr	ĺλ.
Dalk	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Баутте	Telephone number	002	ise is) 5
				1.06	, <i>Y</i> 0,	

SUBJECT: YELLOW CAB COMPANY OF DUVAL COUNTY, INC.

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

ARTICLES OF INCORPORATION

95 1PR -4 111 0 20

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE | NAME

The name of the corporation shall be:

YELLOW CAB COMPANY OF DUVAL COUNTY, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

11530 PHILLIPS HIGHWAY JACKSONVILLE, FLORIDA 32256

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

SANFORD L. STEINMAN
4121 NAKEMA DRIVE SOUTH
JACKSONVILLE, FL 3225%

ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

SANFORD L. STEINMAN
4121 NAKEMA DRIVE SOUTH
JACKSONVILLE, FLORIDA 32257

4th	day of	April	, 19 <u>95</u>
	Suf 1	<i>[-</i>	
	May I	Signature	
		Signature	

Articles of Incorporation Filing Fee - \$35

Signature

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. T	he name of the corporation is: YELLOW CAB COMPANY OF DU	VAL COUNTY,	INC.
2. T	The name and address of the registered agent and office is:	SECOLO TALLAN	01777
	SANFORD L. STEINMAN (Name)	1	e steriorista a a secondo de secondo
	(P.O. Box or Mail Drop Box NOT acceptable)	ق. ق: - در ر	in said Nasart
	JACKSONVILLE, FL 32256 (City/State/Zip)	' ပ -	

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

(Signature) 4/4/75