P95000026503

TRANSMITTAL LETTER REGENTER

25 APR -4 AM 9:.

- HISTOR OF CORPORAL

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

SUBJECT: BEACHES YELLOW CAB OF DUVAL COUNTY, INC.

(Proposed corporate name - must include suffix)

4000014446774 -04/04/95--01027--010 *****78.75 *****78.75

for:	\$70.00 \$iling Fee	\$78.75 Filing Fee & Certificate	py of the articles of \$122.50 Filing Fee & Certified Copy Additional Copy	\$131.25 Filing Fee, Certified Copy & Certificate		UK .
	FROM:	SANFORD L.	STEINMAN		건:: 10	
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		(904) 292-		10		
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NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

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 I NAME

The name of the corporation shall be:

BEACHES YELLOW CAB 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 32256

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, FL 32257

undersigned	I incorporator(s) has(have) execut	ed these Articles of Incorporation
4th	day of	April	, 19 <u>95</u>
	Say	2 SE	
<u></u>		Signature	
		Signature	·
		Signature	

Articles of Incorporation Filing Fee - \$35

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. The name of the corporation is	BEACHES	YELLOW	CAB OF	DUVAL	COUNTY	, INC.	,
	-						
2. The name and address of the I	ffice is:		CE CE	95 IFA -1	THE STATE OF THE S		
(Name) 11530 PHILLIPS HIGHWAY (P.O. Box or Mail Drop Box NOI acceptable)						•	
					-		
JACKSONVILLE,	FL 3225	5					
	(City/State	/Zip)	···				

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.

13261 112 4495 (Signature) (Date)