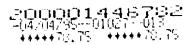
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TRANSMITTAL LETTER

95 APR - 4 7.11 9: 45 PROPERTY OF COMPORATION

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



SUBJECT: _	AMERICAN	СУВ	COMPANY,	INC.	
	(Proposed corporate name - must include su fix)				

Enclosed is an original and or	one (1) copy of the articles of incorporation and a ch	eck
for ·		

\$70.00 Filing Fee

\$78.75 Filing Fee & Certificate \$122.50

\$131.25

Filing Fee & Certified Copy Filing Fee, Certified Copy & Certificate

Additional Copy Required

FROM:

SANFORD L. STEINMAN

Name (printed or typed)

11530 PHILLIPS HIGHWAY

Address

JACKSONVILLE, FL 32256

City, State & Zip

(904) 292-3770

Daytime Telephone number

Reportation of melalia

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:

AMERICAN CAB COMPANY, INC.

ARTICLE II PRINCIPAL OFFICE

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

11530 PHILLIPS HIGHWAY JACKSONVILLE, FL 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

A121 NAKEMA DRIVE SOUTH

JACKSONVILLE, FL 32256

ARTICLE V INCORPORATORISI

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

4th	day of		ted these Articles of Incorporation
	Jan 1	M-	
	/whe/	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, FL RIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: AMER	RICAN CAB COMPANY, INC.
2. The name and address of the registered	l agent and office is: 물었 이 모목
SANFORD L. STEINMA	N CC
(Na	ame)
115300PHILLIPS HIG	
(P.O. Box or Mail Dro	pp Box NOI acceptable)
JACKSONVILLE, FLOR	RIDA 32256
(City/St	tate/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 obligation of my position as registered agent.

1997 1997 4405 (Signature) (Date)