

P99000027962

CAPITOL SERVICES d/b/a
PARALEGAL & ATTORNEY SERVICE BUREAU, INC.

(Requestor's Name)

1406 Hays Street, Suite 2

(Address)

Tallahassee, FL 32301 (904) 656-3992

(City, State, Zip)

(Phone #)

OFFICE USE ONLY

400002817994--9

-03725/99--01035--008

*****78.75 *****78.75

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. Transitions / Adolescent Transport, Inc.
(Corporation Name) (Document #)

2. _____
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

☒ Walk in

☒ Pick up time 3/25

☒ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

FILED
99 MAR 26 PM 12:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark

W-7214
25

RECEIVED
99 MAR 25 AM 10:43

T. SMITH MAR 26 1999



Resubmit

FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

March 25, 1999

Please back date

CAPITOL SERVICES

SUBJECT: TRANSITIONS, INC.
Ref. Number: W99000007214

We have received your document for TRANSITIONS, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of a name is not acceptable. Please select a new name and make the correction in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6927.

Tracy Smith
Document Specialist

Letter Number: 699A00015049

RECEIVED
99 MAR 26 AM 10:55
FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

FILED

99 MAR 26 PM 12:22

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**ARTICLES OF INCORPORATION
OF
TRANSITIONS/ADOLESCENT TRANSPORT, INC.**

The undersigned, IRA C. HATCH, ESQUIRE, acting as Incorporator of a Florida corporation under the Florida General Corporation Act, Chapter 607 of the Florida Statutes, hereby adopts the following Articles of Incorporation for such Corporation.

ARTICLE I

NAME

The name of the Corporation is TRANSITIONS/ADOLESCENT TRANSPORT, INC.

ARTICLE II

PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:
c/o Hatch & Doty, P.A., 1701 Highway A1A, Suite 220, Vero Beach, FL 32963.

ARTICLE III

PURPOSE

The purpose of the business to be established is for any lawful purpose or purposes.

ARTICLE IV

CAPITAL STOCK

The Corporation is authorized to issue 100 shares of Common Stock with a par value of \$.001.

ARTICLE V

INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial Registered Agent is:

Ira C. Hatch, Esq. 1701 Highway A1A, Suite 220, Vero Beach, Florida 32960.

ARTICLE VI

INCORPORATOR(S)

The name and address of the person signing these Articles is:

Name

Address

Ira C. Hatch, Esquire

1701 Highway A1A
Suite 220
Vero Beach, FL 32963

IN WITNESS WHEREOF, the undersigned has executed these Articles of Incorporation
this 11th day of March, 1999.



IRA C. HATCH, INCORPORATOR

CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 607.0501, 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: TRANSITIONS/ADOLESCENT TRANSPORT, INC.
2. The name and address of the Registered Agent and office is:

IRA C. HATCH, ESQ.
1701 Highway A1A, Suite 220
Vero Beach, Florida 32963

Signature: _____

IRA C. HATCH, ESQ.

Title: Incorporator

Date: _____

3/11/99

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99 MAR 26 PM 12:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: _____

IRA C. HATCH

Date: _____

3/11/99