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.

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To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : 120000000019

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:	
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## FLORIDA PROFIT/NON PROFIT CORPORATION VERSALLES TOURS & SERVICES INC.

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

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME: The name of the corporation is:		
Versalles Tours & Services Inc.		
ARTICLE II PRINCIPAL OFFICE:	-	
The principal street address and mailing address is:  67 E 12 ST  H10/00h A 330/0		
ARTICLE III SHARES: The number of shares of stock is:		
Jaidys GACET (P)		
	2021	
	007	er
	1 + 6	, <u></u>
	AH 2:	6 72 6 55 6
ARTICLE V INTTIAL REGISTERED AGENT AND STREET ADDRESS:	27	
The name and Florida street address (PO Box not acceptable) of the registered agent is:		
Jaichys Gracet		
67 E 12 St		
Higleah Fl 3300		

## 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 familian with and accept the appointment as registered agent and agree to act in this capacity

Registered Agent

10/14/21 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 2.817.155, F.S.

Incorporator

Date

2021 OCT 14 AH 2: 2 SECRETATION AND A