

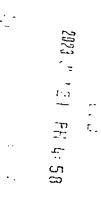
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T. LEMIEUX JUN 2 7 2023

COVER LETTER *

TO: Registration Section Division of Corporation	S			
SUBJECT: Panache Cruises, In	c			
	Name of corporation - n	nust include suffix		
Dear Sir or Madam:				
The enclosed "Application by Fo "Certificate of Existence," or "C above referenced foreign corpora	ertificate of Good Standin	g" and check are submi		
Please return all correspondence	concerning this matter to	the following:		
David Marshall				
	Name of Per	son	·	
Panache Cruises				
, -	Firm/Compa	ıy		
1401 Lavaca St #364				
	Address		············	
Austin, TX 78701				
	City/State and	Zip code		
dmarshall@akamaigroup.com				
E-ma	I address: (to be used for	future annual report not	ification)	
For further information concerni	ng this matter, please call:			
David Marshall	at (⁸³¹	537-8519	7-8519	
Name of Person	Area Code	Daytime Telepho	ne Number	
STREET/COURIER A Registration Section Division of Corporation: The Centre of Tallahasse 2415 N. Monroe Street, Tallahassee, FL 32303	s ee	MAILING AD Registration Sec Division of Corp P.O. Box 6327 Tallahassee, FL	tion porations	
<u>-</u>	ORIDA DEPARTMENT OI 3.75 Filing Fee &	F STATE 78.75 Filing Fee & Certified Copy	■ \$87.50 Filing Fee, Certificate of Status & Certified Copy	

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

Panache Cruise:	s, Inc.			
	corporation: must include "INCORPORATED, Corp." "Inc." "Co." or "Corp.")	" "COMPANY," "CORPORAT	ION,"	
Panache Cruise:	s and Travel, Inc			
(If name unavail	able in Florida, enter alternate corporate name	adopted for the purpose of transa	cting busines:	s in Florida)
2. Delaware	3	93-1631974		
	ry under the law of which it is incorporated)	(FEI number, if applicable)		
4. May 16, 2023	5.	N/A		
(Date	of incorporation)	(Date of duration, if ot	her than perpe	etual)
6. Plan to transact	business in Florida starting August 15, 2023			
1401 Lavaca St. :	(SEE SECTIONS 607.1501 & 607.1	n Florida, if prior to registration) 502, F.S., to determine penalty lia	ability)	
7.	#364 Austin, TX 78701 (Principal off	ice street address)		
Same	(. r.nc.pa. 51.	accies,		2023
	(Current maili	ng address, if different)		
8. Name and stree	et address of Florida registered agent: (P.C	D. Box <u>NOT</u> acceptable)		
Name:	Registered Agents Inc	<u></u>	·	- F:
Office Address:	7901 4th St N. STE 300			53
	St. Petersburg	, Florida 33702		
	(City)	(Zip code)		

9. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

(Registered agent's signature)

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

A. DIRECTORS Name: ____ sames Cole □ Chairman Name: _____ Chairman Address: ____ ☐ Vice Chairman ☐ Vice Chairman Address: Austin, TX □ Director □ Director □President □ President ☐ Vice President ☐ Vice President ☐ Secretary Treasurer ☐ Secretary □Treasurer ■Other CEO Other _____ □Other _____ □Other □ Chairman Name: _____ ☐ Chairman Name: □Vice Chairman Address: _____ Address: ☐ Vice Chairman Director □ Director □President President □ Vice President ☐ Vice President ☐ Secretary □Treasurer ☐ Secretary □Treasurer □Other □Other ____ Other _____ □ Chairman Chairman Name: _____ Name: □ Vice Chairman Address: _____ □ Vice Chairman Address: □ Director □ Director ☐ President □ President □Vice President ___ ☐ Vice President ☐ Secretary ☐ Treasurer ☐ Secretary □Treasurer □Other _____ Other ____ □Other Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form. Signature of Director or Officer The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in

s.817.155, F.S.

James Cole, CEO / Founder

Page 1

Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "PANACHE CRUISES, INC" IS DULY

INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD

STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS—

OF THIS OFFICE SHOW, AS OF THE TWENTY-SIXTH DAY OF MAY, A.D. 2023.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "PANACHE CRUISES,
INC" WAS INCORPORATED ON THE SIXTEENTH DAY OF MAY, A.D. 2023.

Authentication: 203435262

Date: 05-26-23