

POS000014934

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000044056350

01/13/05--01028--012 **148.75

FILED
05 JAN 28 PM 3:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

W05-2398

TH 1/28/05

TRANSMITTAL LETTER

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

SUBJECT: BUDGET WHOLESALE TOURS INC.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00
Filing Fee

☒ \$78.75
Filing Fee
& Certificate of Status

☐ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: Monica Dueñas / Juan Carlos Basurto
Name (Printed or typed)

9140 SW 56 ST.

Address

MIAMI, FL. 33165

City, State & Zip

(305) 586-9608 (305) 968-7902

Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

January 14, 2005

MONICA DUENAS
9140 SW 56 ST
MIAMI, FL 33165

SUBJECT: BUDGET WHOLESALE TOURS INC.
Ref. Number: W05000002398

We have received your document for BUDGET WHOLESALE TOURS INC. and your check(s) totaling \$148.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with an address and telephone number where you can be reached during working hours.

The document must state the number of shares of authorized stock.

You must list at least one incorporator with a complete business street address.

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

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) 245-6855.

Tammy Hampton
Document Specialist
New Filings Section

Letter Number: 105A00002948

05 JAN 28 AM 9:00
RECEIVED
FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

BUDGET WHOLESALE TOURS INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

9140 SW 56 ST.
MIAMI, FL. 33165

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TOURS BUSINESS

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

MONICA DUEÑAS	9140 SW 56 ST. MIAMI, FL 33165	PRESIDENT
JUAN CARLOS BASURTO	2934 SW 7 ST. MIAMI, FL. 33135	VICE- PRESIDENT

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

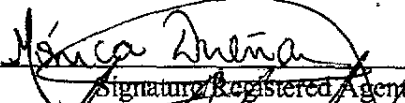
MONICA DUEÑAS 9140 SW 56 ST. MIAMI, FL. 33165

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

MONICA DUEÑAS	9140 SW 56 ST. MIAMI, FL. 33165
JUAN CARLOS BASURTO	2934 SW 7 ST. MIAMI, FL. 33135

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


Signature/Registered Agent

01/24/05

Date


Signature/Incorporator

01/24/05

Date

FILED

05 JAN 28 PM 3:38

SECRETARY OF STATE
TALLAHASSEE FLORIDA