

P07000007059

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

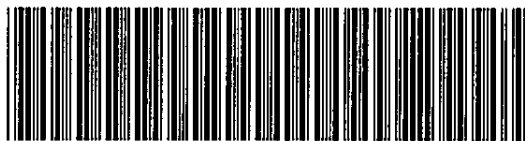
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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07 JAN 16 AM 9:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1/18
SP

COVER LETTER

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

SUBJECT: My Travel Plans 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: Darlynn Scott-Carridine

Name (Printed or typed)

401 NW 80 St

Address

Miami Florida 33150

City, State & Zip

305-758-0378

Daytime Telephone number

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

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:

My Travel Plans Inc

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

401 NW 80 St
Miami. FI 33150-2808

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Travel Agency to provide travel to individuals

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):

Darlynn Scott-Carridine	Fannie Scott	Chrislynn Carridine
401 NW 80 St.	401 NW 80 St.	401 NW 80 St.
Miami FL 33150	Miami FL 33150	Miami FL 33150
President/Director	Asst. Manager	Secretary

ARTICLE VI REGISTERED AGENT

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

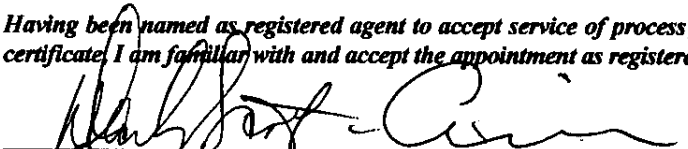
Darlynn Scott- Carridine
401 NW 80 St.
Miami FL 33150

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Darlynn Scott-Carridine
401 NW 80 St.
Miami FL 33150

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


Signature/Incorporator

FILED
07 JAN 16 AM 9:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1-10-07
Date

1-10-07
Date