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DIVISION OF CORPORATIONS  
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6109-36753

UNT 9/29

## COVER LETTER

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

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
09 SEP 28 AM 10:09

SUBJECT: SKIES TRAVEL, 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: LUIS A. DIAZ  
Name (Printed or typed)

2030 NW 188 TH AVE  
Address

PEMBROKE PINES, FL. 33029  
City, State & Zip

(954) 496-4775  
Daytime Telephone number

rgbookkeeping@aol.com  
E-mail address: (to be used for future annual report notification)

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 14, 2009

LUIS A. DIAZ  
2030 NW 188TH AVE.  
PEMBROKE PINES, FL 33029

SUBJECT: SKIES TRAVEL, INC.  
Ref. Number: W09000036753

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
09 SEP 28 AM 10: 09

We have received your document for SKIES TRAVEL, INC. and your check(s) totaling \$70.00. 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.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

**Adding "of Florida" or "Florida" to the end of a name is not acceptable.**

The Florida Statutes require an entity to designate a street address for its principal office address. A post office box is not acceptable for the principal office address. The entity may, however, designate a separate mailing address. The mailing address may be a post office box.

Please return the corrected 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) 245-6921.

Maryanne Dickey  
Document Specialist Supervisor  
New Filing Section

Letter Number: 809A00027676



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

September 15, 2009

LUIS A. DIAZ GONZALES  
2030 NW 188TH AVENUE  
PEMBROKE PINES, FL 33029

SUBJECT: PAYA TRAVEL INC.  
Ref. Number: W09000041344

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
09 SEP 28 AM 10:09

We have received your document for PAYA TRAVEL INC., however, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State.

The fees for profit and nonprofit, domestic or foreign are as follows:

Filings Fees:	\$35.00
Registered Agent Designation	\$35.00
Certified Copy	\$8.75
Certificate of Status	\$8.75

Please return the corrected 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) 245-6062.

Eula Peterson  
Regulatory Specialist II  
New Filing Section

Letter Number: 009A00030463

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DIVISION OF CORPORATIONS  
09 SEP 28 AM 10:09

I Luis A. Diaz, I <sup>had</sup> send you the money  
to open my Co. PAYA TRAVEL INC. but you  
enter to SKIES TRAVEL INC. Please be  
advise to credit my Co. with "PAYA  
TRAVEL INC" so I will be able to per  
form, and open my credential. - AS A  
Regist. Co., I am also inclosing a copy  
of my check, to open the account.  
Please, correct my acc. and write my  
Co. in the proper place. AS "PAYA TRAVEL  
INC. -

Please correct my situation, so I  
be able to open my acc., and proceed  
to be in proper order to be a "PAYA  
TRAVEL INC. -

Thank you.

Please a question: 954-496-4725.

FILED  
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DIVISION OF CORPORATIONS  
09 SEP 28 AM 10:09

**SUBJECT:** Paya Travel Inc.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

☒ \$70.00      ☐ \$78.75  
Filing Fee      Filing Fee  
                         & Certificate of Status

FROM: \_\_\_\_\_  
Name (Printed or typed)

\_\_\_\_\_

2030 NW 168th Avenue  
\_\_\_\_\_

Address

\_\_\_\_\_

Pembroke Pines, FL 33029  
\_\_\_\_\_

City, State & Zip

\_\_\_\_\_

786-838-6155  
\_\_\_\_\_

Daytime Telephone number

\_\_\_\_\_

jacalex1@hotmail.com  
\_\_\_\_\_

E-mail address: (to be used for future annual report notification)

**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:

Paya Travel Inc.

**ARTICLE II PRINCIPAL OFFICE**

The principal street address and mailing address, if different is:

2030 NW. 188th Avenue  
Pembroke Pines, FL 33029

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Sales, promotion and organization of travel, travel agencies, travel related products and import export of services and packages for the travel industry. Also import, manufacture and sales of products and services that the directors and president consider necessary and profitable for the corporation.

**ARTICLE IV SHARES**

The number of shares of stock is:

100 shares

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

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

Luis A. Diaz Gonzales President, Secretary

**ARTICLE VI REGISTERED AGENT**

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



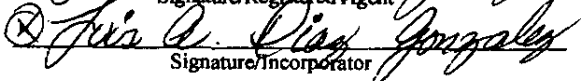
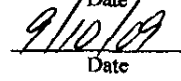
Luis A. Diaz Gonzales  
2030 NW. 188th Avenue  
Pembroke Pines, FL. 33029

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Luis A. Diaz Gonzales  
2030 NW. 188th Avenue  
Pembroke Pines, FL. 33029

\*\*\*\*\*  
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	Date
	
Signature/Incorporator	Date

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