

P0900008/229

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

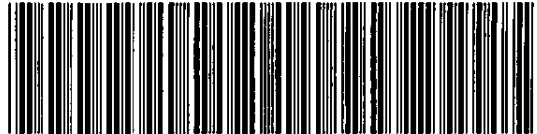
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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09/14/09--01019--005 \*\*78.75

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2009 SEP 28 P 3:02

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**COVER LETTER**

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

SUBJECT: KS Travel Co.  
(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: Christine Fernandez  
Name (Printed or typed)

2001 Biscayne Blvd #2410  
Address

miami FL 33187  
City, State & Zip

786 246 0877  
Daytime Telephone number

✓ Christine0628@gmail.com  
E-mail address: (to be used for future annual report notification)

SECRETARY OF STATE  
TALLAHASSEE, FL 32314

2009 SEP 28 P 3:02

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RECEIVED  
09 SEP 28 PM 4:45  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

September 17, 2009

CHRISTINE FERNANDEZ  
2001 BISCAYNE BLVD #2410  
MIAMI, FL 33137

SUBJECT: KS TRAVEL CO.  
Ref. Number: W09000041758

We have received your document for KS TRAVEL CO. and your check(s) totaling \$78.75. 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.**

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) 245-6933.

Dale White  
Regulatory Specialist II  
New Filing Section

Letter Number: 709A00030644

Division of Corporations, P.O. BOX 6227, Tallahassee, Florida 32314

# 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:

MIA Vacation Travel Co.

## ARTICLE II PRINCIPAL OFFICE

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

2001 Biscayne Blvd #2410 miami Fl 33137

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

travel consultant & organizer, travel accommodations  
travel guide

## ARTICLE IV SHARES

The number of shares of stock is:

One

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Christine Fernandez - president

## ARTICLE VI REGISTERED AGENT

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

Christine Fernandez  
2001 Biscayne Blvd #2410 miami Fl 33137

## ARTICLE VII INCORPORATOR

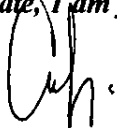
The name and address of the Incorporator is:

Christine Fernandez

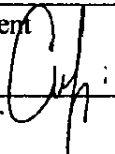
2001 Biscayne Blvd #2410 miami Fl 33137

\*\*\*\*\*

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

9.9.09

Date

9.9.09

Date

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2009 SEP 28 P 3:02  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA