

P090000093185

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

(Document Number)

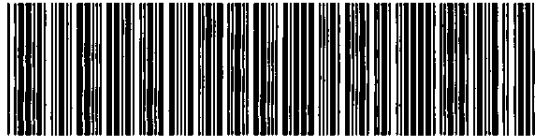
Certified Copies

Certificates of Status

Special Instructions to Filing Officer:

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Office Use Only



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11/03/09--01028--016 \*\*43.75

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09 NOV 12 AM 8:20  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

B McKnight NOV 16 2009



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

November 10, 2009

MIGUEL DIAZ  
217 SE RAY AVE  
PT ST LUCIE, FL 34983

SUBJECT: VACATION SUPERSTORE INC  
Ref. Number: W09000049493

We have received your document for VACATION SUPERSTORE INC and check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

There is a balance due of \$85.00.

We are enclosing the proper form(s) with instructions for your convenience.

You must cancel the fictitious registration \$50.00 filing fee. Corporation fee is 78.75. You have only sent a check for \$43.75. Need an additional 35.00 for the Corporation plus \$50.00 for the fictitious name cancel.

If you have any further questions concerning your document, please call (850) 245-6922.

RoseAnn Varnadore  
Senior Section Administrator  
New Filing Section

Letter Number: 309A00035095

## COVER LETTER

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

**SUBJECT:** NAME CHANGE, TO "VACATION SUPERSTORE 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:** Vacation Superstore  
Name (Printed or typed)

217 SE Ray Ave  
Address

Port Saint Lucie FL 34983  
City, State & Zip

772-879-2519  
Daytime Telephone number

vacationsuperstore@bellsouth.net  
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: Vacation Superstore Inc

### **ARTICLE II PRINCIPAL OFFICE**

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

217 SE Ray Ave  
Port St Lucie, FL 34983

### **ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Travel Bureau, Travel Agent

### **ARTICLE IV SHARES**

The number of shares of stock is:

1000

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

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

Miguel Diaz President  
217 SE Ray Ave  
Port St Lucie, FL 34983

### **ARTICLE VI REGISTERED AGENT**

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

Miguel Diaz President  
217 SE Ray Ave  
Port St Lucie, FL 34983

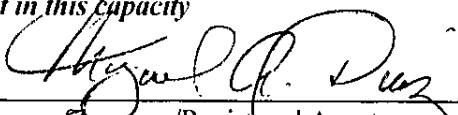
### **ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

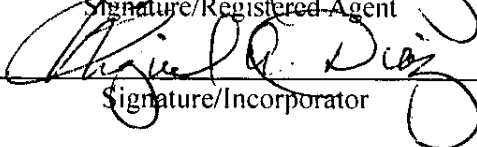
D & E Income Tax Services  
1971 SE Port St Lucie Blvd  
Port St Lucie FL 34952

\*\*\*\*\*

*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

11/09/2009

Date

11/09/2009

Date

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