

P10000088889

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

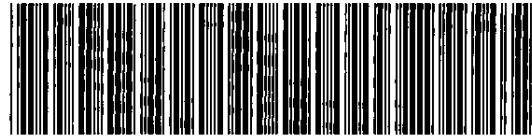
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2010 OCT 28 PM 2:49
STATE OF FLORIDA
TALLAHASSEE, FLORIDA

T. Bureh NOV 2 2010

COVER LETTER

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

SUBJECT: EUROLATINA 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 ☒ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status
ADDITIONAL COPY REQUIRED

FROM: YANELLE M. BARINAS
 Name (Printed or typed)

5701 NW 36 ST
 Address

MIAMI, FL 33166
 City, State & Zip

305-871-0889
 Daytime Telephone number

EBIDEGAIN@GMAIL.COM
 E-mail address: (to be used for future annual report notification)

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

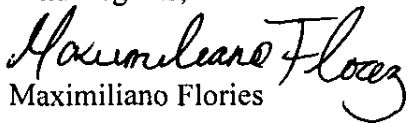
October 22, 2010
Miami, Florida

Dear Sir/Madam:

I, Maximiliano Flores, president/owner of Eurolatina Tours, Inc. with Document number P03000052183, hereby relinquish the company name to be used to incorporate a new company with the same name. The new company will be associated with the previous company by its owner.

Please contact me at (305) 606-9603 should you require further information or have any concerns.

Kind Regards,


Maximiliano Flories

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: EUROLATINA TOURS, INC.

ARTICLE II PRINCIPAL OFFICE

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

10773 NW 58TH STREET
SUITE # 422
MIAMI FL 33166

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY AND ALL LAWFUL PURPOSES

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):

MAXIMILIANO FLORES, PD
10521 SW 142ND STREET
MIAMI FL 33186

ARTICLE VI REGISTERED AGENT

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

MAXIMILIANO FLORES
10773 NW 58TH STREET, SUITE # 422
MIAMI FL 33166

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

MAXIMILIANO FLORES
10521 SW 142ND STREET
MIAMI FL 33186

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

Maximiliano Flores

Signature/Registered Agent

Maximiliano Flores

Signature/Incorporator

10/22/10

Date

10/22/10

Date

FILED
2010 OCT 28 PM 2:49
CLERK OF STATE
TALLAHASSEE, FLORIDA