

P11000026152

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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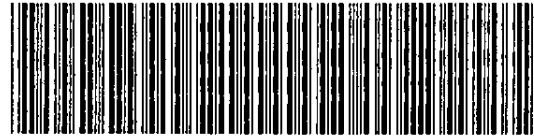
(Business Entity Name)

(Document Number)

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

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11 MAR 14 PM 4:57  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## COVER LETTER

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

SUBJECT: Premiere Travel Management, 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: Premiere Travel Management, Inc.

Name (Printed or typed)

501 NW 15<sup>th</sup> CT

BOCA RATON, FL 33486

561 347 2110

howster007@hotmail.com

**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: **Premiere Travel Management, Inc.**

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
501 NW 15th Ct.  
Boca Raton, FL 33486

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:  
Profit

**ARTICLE IV SHARES**

The number of shares of stock is: 100

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

Name and Title:  
Address:

**W** Mr. Howard Weiss **PRES.**  
501 NW 15th Ct.  
Boca Raton, FL 33486

Name and Title:  
Address:

Name and Title:  
Address:

Name and Title:  
Address:

Name and Title:  
Address:

Name and Title:  
Address:

**ARTICLE VI REGISTERED AGENT**

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

Name:  
Address:

**W** Mr. Howard Weiss **PRES.**  
501 NW 15th Ct.  
Boca Raton, FL 33486

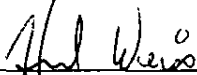
**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name:  
Address:


**W** Mr. Howard Weiss **PRES.**  
501 NW 15th Ct.  
Boca Raton, FL 33486

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

  
Required Signature/Registered Agent

3/10/11  
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

  
Required Signature/Incorporator

3/10/11  
Date

RECEIVED  
MAR 14 PM 4:57  
DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA