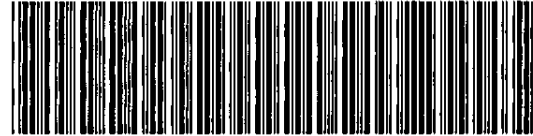


P110000065955



900210144609

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

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(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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DIVISION OF CORPORATIONS
11 JUL 21 AM 10:48

PS 7/22/11

COVER LETTER

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

SUBJECT: T & R 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: THOMAS MELROSE

Name (Printed or typed)

51 NW 115 AVE #107

Address

PLANTATION FL 33325

City, State & Zip

954-871-7679

Daytime Telephone number

slimports@msn.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: **T & R TRAVEL INC**

ARTICLE II PRINCIPAL OFFICE

Principal street address

51 NW 115 AVE

107

PLANTATION FL 33325

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

VACATION TELE SALES FOR PROFIT

ARTICLE IV SHARES

The number of shares of stock is: **100**

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: **THOMAS MELROSE PRESEIDENT**

Address: **51 NW 115 AVE**

107

PLANTATION FL 33325

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: **THOMAS MELROSE**

Address: **51 NW 115 AVE #107**

PLANTATION FL 33325

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

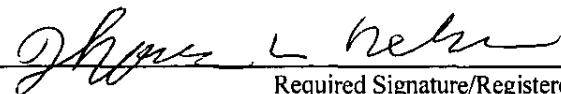
Name: **THOMAS MELROSE**

Address: **51 NW 115 AVE # 107**

PLANTATION FL 33325

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 JUL 21 AM 10:48

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

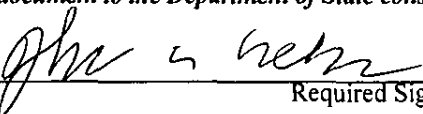


Required Signature/Registered Agent

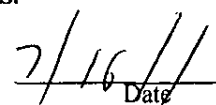


Date

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



Date