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COVER LETTER

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

TRAVEL BOOQ, COM, FNC.
(PROPOSED CORPORATE NAME-MUST INCLUDE SUFFIX) SUBJECT: Enclosed are an original and one (1) copy of the articles of incorporation and a check for: **28.75** \$78.75 **□** \$70.0Ø \$87.50_ Filing Fee, Filing Fee Filing Fee Filing Fee & Certificate of Status & Certified Copy Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED FROM: PEDRO CASTELLAND, JR Name (Printed or typed) CORAL GABLES, FLORIDA 33134 City, State & Zip 305-307 - 955 / 781 344 3624

Daytime Telephone number

CASTELLAND. DEDNO & YAHOO, COM PEONOCASELLANO PMSN.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)

he name of the corporati	ICIPAL OFFICE			$-\frac{1}{2}$ ω	
	Principal street address	Mailing	g address, if differ	Meis: S	T
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RTICLE V INIT Name and Title: Address	AL OFFICERS AND/OR DIRECTORS PEDRO CASTELLAND, SR RUA CAIMBE 188 RIO DE JANBIRO, RJ ZZIO PEDRO CASTELLAND, TO	Name and Title: Address: C <u>E</u> , O Name and Title:	SECRETA DINAMA VICE-PR	OESIOGS	<u> </u>
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RTICLE V INIT Name and Title: Address Name and Title: Address	AL OFFICERS AND/OR DIRECTORS PEDRO CASTELLAND, SR RUA CAIMBE 188 RIO DE TANBIRO, RT 2210 PEDRO CASTELLAND, TR 429/SW 14 ST CORAL GABLES, FL. 33 1	Name and Title: Address: 2 - 7/0 Name and Title: Address:	SECRETA DIRAMA VICE-PR TREASY BIREC	PESIDEN RER	
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Address	Title: TORGE A. FRANCO QUIN		DIRECTOR
	CALLE #2, MANZANA #J		
	CASA 32 EJIDU, MERIDA	_	
	VENEZUELA		E 52 -
ARTICLE VI	REGISTERED AGENT		3 A
	rida street address (P.O. Box NOT acceptable) of	the registered agent	is:
Name:	PEDRO CASTELLAND, JR.		SERVICE SERVIC
Address:	4295 SW 14 ST		
	CORAL GABLES, FL.	33 134	9: 29 \$1ATE LORIDA
ARTICLE VII	INCORPORATOR		
The name and add	ress of the Incorporator is:		
Name:	PEDRO CASTRILANO SI	2_	
Address:	RUA CAMBE 188		
	RIUDE TANGINO, RT	CEP	
	221	0-710	
	ed as registered agent to accept service of process j in familiar with and accept the appointment as regi		
<	- Allano		4/23/2013
	Required Signature/Registered Agent		Date
	ment and affirm that the facts stated herein are to epartment of state constitutes a third degree felony		
			W/ alana
	Required Signature/Incorporator		4/23/2017