## P130000661

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP	WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				



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07/05/13--01014--008 \*\*78.75

FILED

13 JUL 17 PM 12: 12

SECRETARY OF STATE FLORID.

Office Use Only

1113-39050 MD

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## **COVER LETTER**

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

SUBJECT: (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)			
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	<u>UDE SUFFIX</u> )
Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation and	d a check for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status  PY REQUIRED
FROM:	Aideni Gon	170167. e (Printed or typed)	
441 E 42 St.  Address			
Hialan FL 33013.			
	305-F	587-478°	9.
	COLVOVEL	ed for future annual report	notification)

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



July 10, 2013

AIDENI GONZALEZ 441 E. 42ND STREET HIALEAH, FL 33013

SUBJECT: MAGICAL TRAVEL CORP

Ref. Number: W13000039050

We have received your document for MAGICAL TRAVEL CORP and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 617.0202(d), Florida Statutes, requires the manner in which directors are elected or appointed be contained in the articles of incorporation or a statement that the method of election of directors is as stated in the bylaws.

The purpose contained in your articles of incorporation should be more specific. Please correct your articles to reflect the specific purpose for which the non profit corporation is being organized.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Maryanne Dickey Regulatory Specialist II New Filing Section

Letter Number: 713A00016900

www.sunbiz.org

Division of Company in D.O. DOV 6207 Mallaharma Florida 2021

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I The name of the cor	<b>NAME</b> poration shall be:	Magic	al Trave	el cor	ρ.	
ARTICLE II	PRINCIPAL OFFI	CE andress	N	Mailing address, it	f different is:	
441E Hial	42.	S+. L 3301-	14io	Hean	FL 32	<u>-1</u> 5100
ARTICLE III I	PURPOSE ich the corporation is	organized is:	rowel oc	jency	by	
					SECRETAR FALLAHASS	
ARTICLE IV S The number of share	SHARES es of stock is:	., ~ ~ -			PH 12: 1.2 Y OF STATE EE. FLORIDA	0
ARTICLE V  Name and Address	N. 400	es and/or direct 11, GONZO 12 St Un FL3°	ETORS  HCL Name and Title:  Address:  003			
Name and T Address						<del></del>
Name and 7 Address	itle:		Name and Title: Address:			

Name and Title:	Name and Title:
Address	Address:
	i.i.s
ADDIOLD III DECICORDED ACRES	ECRE
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable)	a) of the registered agent is:
Name: Address: History FL 3301	RY OF STATE SEE. FLORIDA
ARTICLE VII INCORPORATOR	
The name and address of the Incorporator is:  Name: Aiden Jonzoff  441 E 42 54  Hiwah FL 330	<u>2.</u>  <u>013</u> .
Having been named as registered agent to accept service of prothis certificate, I am familiar with and accept the appointment at Required Signature/Registered Agent	7/11/12
	are true. I am aware that the false information submitted in a