

12/4/13 12:00:40 From: 850617-5381

Division of Corporations

Page 1 of 1

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations
Fax Number : (850) 617-5381

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000021
Phone : (850) 222-1092
Fax Number : (850) 878-5368

RE-SUBMIT

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****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION

Suncoast Excursions, Inc.

Certificate of Status	0
Certified Copy	0
Page Count	045
Estimated Charge	\$70.00

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
13 DEC -3 PM 12:54

Electronic Filing Menu

Corporate Filing Menu

Help

g 12/5/13

COVER LETTER

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

SUBJECT: Suncoast Excursions, 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: Suncoast Excursions, Inc

Name (Printed or typed)

2 South Biscayne Boulevard

Address

Miami, FL 33131

City, State & Zip

855-727-7552

Daytime Telephone number

info@travelmemberservices.com

E-mail address: (to be used for future annual report notification)

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

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12/4/2013 11:54:31 AM PAGE 17001

Fax Server

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DIVISION OF CORPORATIONS

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December 4, 2013

FLORIDA DEPARTMENT OF STATE
Division of Corporations

C T CORPORATION SYSTEM

RE-SUBMIT

SUBJECT: SUNCOAST EXCURSIONS, INC.
REF: W13000066280

Please retain original filing
date of submission 12/3

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The registered agent must sign accepting the designation.

Please have a person sign for the corporation listed as Registered Agent. The corporation can not sign for itself.

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

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

Claretha Golden
Regulatory Specialist II
New Filing Section

FAX Aud. #: H13000264342
Letter Number: 413A00027620

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

13 DEC -4 PM 1:47

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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

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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: Suncoast Excursions, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal ~~street~~ address

Mailing address, if different is:

2 South Biscayne Boulevard

Miami, FL 33131

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: selling travel memberships

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Jason Fox President

Name and Title: _____

Address 2 South Biscayne Boulevard

Address: _____

Miami, FL 33131

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

(cont.)

Name and Title: _____ Name and Title: _____
Address: _____ Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: C T Corporation System
Address: 1200 South Pine Island Road
Plantation, FL 33324

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Jason Fox
Address: 2 South Biscayne Boulevard
Miami, FL 33131

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 for the corporation in this capacity

By: C T Corporation System Assistant Secretary 12/3/2013
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.

[Signature] December 2, 2013
Required Signature/Incorporator Date

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