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## COVER LETTER

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

**SUBJECT:** World VIP 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      ☒ \$78.75  
Filing Fee      Filing Fee  
                         & Certificate of Status

☐ \$78.75      ☐ \$87.50  
Filing Fee      Filing Fee,  
& Certified Copy      Certified Copy  
                         & Certificate of  
                         Status  
**ADDITIONAL COPY REQUIRED**

**FROM:** STEVEN COOPER

\_\_\_\_\_  
Name (Printed or typed)

4001 SANTA BARBARA BLVD # 366

\_\_\_\_\_  
Address

NAPLES, FL 34104

\_\_\_\_\_  
City, State & Zip

239-398-3637

\_\_\_\_\_  
Daytime Telephone number

steven@sjcfinance.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: World VIP Travel, Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
4001 Santa Barbara Blvd # 366  
Naples, FL 34120

Mailing address, if different is:  
3269 Sturgeon Bay Court  
Naples, FL 34120

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: A LEGAL & PROFESSIONAL TRAVEL CORPORATION

**ARTICLE IV SHARES**

The number of shares of stock is: 100

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

Name and Title: Jeremy M. Russo, President

Name and Title: \_\_\_\_\_

Address 4420 N 19th Place

Address: \_\_\_\_\_

Phoenix, AZ 85016

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address \_\_\_\_\_

Address: \_\_\_\_\_

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2015

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: STEVEN COOPER  
Address: 4001 SANTA BARBARA BLVD # 366  
NAPLES, FL 34104

**ARTICLE VII INCORPORATOR**

The **name and address** of the Incorporator is:

Name: STEVEN COOPER  
Address: 4001 SANTA BARBARA BLVD # 366  
NAPLES, FL 34104

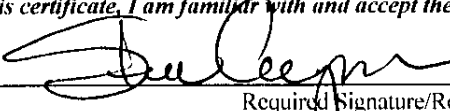
**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)


**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

*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

07/14/2014  
\_\_\_\_\_  
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

07/14/2014  
\_\_\_\_\_  
Date