## P160000069504

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates	of Status		
Special Instructions to Filing Officer:				
W16-52	368			

Office Use Only



000287982390

07/19/16--01018--011 \*\*87.50





## **COVER LETTER**

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

osed are an orig	inal and one (1) copy of the ar	ticles of incorporation and	a check for:
\$70.00 Filing Fee	■ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fée & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status
		ADDITIONAL CO	

Guishu Yuan
Name (Printed or typed)
7904 N. Orange Blossom Trail
Address
Orlando, Florida 32810
City, State & Zip
407-456-0373
Daytime Telephone number
polcenus@gmail.com
E-mail address: (to be used for future annual report notification)



July 27, 2016

GUISHU YUAN 7904 N. ORANGE BLOSSOM TRAIL ORLANDO, FL 32810

SUBJECT: G M INTERNATIONAL TRAVEL INC.

Ref. Number: W16000052368

We have received your document for G M INTERNATIONAL TRAVEL INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document is illegible and not acceptable for imaging. We ask that you type or carefully print the information in the appropriate blocks.

The registered agent must sign accepting the designation.

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.

Valerie Herring Regulatory Specialist II New Filing Section

Letter Number: 916A00015801

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

FILED

ARTICLE I NAME The name of the corporation shall be:	G M INTERNATI	ONAL TRAVELS 23 AM 8: 11
ARTICLE II PRINCIPAL OFFICE Principal street add		SEURETARY OF STATE  Mailing address, I ruffrerent is:
7904 N ORANGE Bli ORlando FL 328		
ARTICLE III PURPOSE The purpose for which the corporation is or		LAWFUL BUSINESS
ARTICLE IV SHARES The number of shares of stock is: 50; to shares	D/OR DIRECTORS	
Name and Title: <u>GUISHU</u>	TUAN - Presidentame a	and Title:
Address <u>7904 N</u> <u>TRAIL</u>	, ORUNYE BLOSSOM Address	s:
	FL 32810.	
Name and Title:	Name a	nd Title:
Address	Address	
-		
Name and Title:	Name a	and Title:
Address	Addres:	s:

	FILEO
Name and Title:	Name and Title AUG 22 AM 8: 11
	Address:  SLUNC JAKY OF STATE  TALLAHASSEE, FLORIDA
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) o	f the registered agent is:
Name: <u>Gul SHU</u> YUAW	_
Address: 7904 N. ORange Blosson	n Ruil
ORlando FL 32810	
	<u>-</u>
ARTICLE VII INCORPORATOR	
The <u>name and address</u> of the Incorporator is:	
Name: <u>GUISHU YUAN</u>	
Address: 7904 N -ORange Blossom	Ruil
ORI and 14 32810	-
ARTICLE VIII EFFECTIVE DATE:	
Effective date, if other than the date of filing:  (If an effective date is listed, the date must be specific and cannot days after the filing.)	(OPTIONAL) of the more than five business days prior or 30 business
Note: If the date inserted in this block does not meet the applicable the document's effective date on the Department of State's records.	statutory filing requirements, this date will not be listed a s
Having been named as registered agent to accept service of process this certificate, I am familiar with and accept the appointment as reg	
Required Signature/Registered Agent	8-17-16 Date
I submit this document and affirm that the facts stated herein are	
document to the Department of State constitutes a third degree felon	y as provided for in s.817.155, F.S.
Required Signature/Incorporator	8-17-16 Date