P16000078947

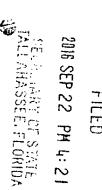
(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				
W16-61	4/3			





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08/29/16--01015--010 **87.50



COVER LETTER

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

SUBJECT:	AS AMERICAS PROPERTIES (US),	INC.	
SUBJECT:	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u> I	JDE SUFFIX)
Enclosed are an or	iginal and one (1) copy of the art	icles of incorporation and	l a check for:
\$70.00 Filing Fee		□ \$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status
		ADDITIONAL CO	PY REQUIRED
FROM: _	Thomas G. James	e (Printed or typed)	
14	400 NE 103 Street		
		Address	
M	liami Shores, FL 33138-2626		
_	City,	State & Zip	
7	86-417-2536	Clarkon number	
jc	Daytime 1 hwright@las-americas-properties.com	elephone number	
	F-mail address: (to be use	d for future annual report t	notification)

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



FLORIDA DEPARTMENT OF STATE Division of Corporations

September 8, 2016

THOMAS G. JAMES 1400 NE 103 STREET MIAMI SHORES, FL 33138-2626

SUBJECT: LAS AMERICAS PROPERTIES, INC.

Ref. Number: W16000061413

We have received your document for LAS AMERICAS PROPERTIES, 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 name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

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: 316A00018891

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

FILED

ARTICLE I NAME The name of the corporati	on shall be:	PERTIES (US), INC.	2016 SEP 22 PM 4: 21
	IPAL OFFICE Principal <u>street</u> address	1	SELECTION OF STATE Mailing address, it different is: FLORIDA
1400 NE 103 Street		РО ВОХ	47
Miami Shores, FL 3313	8-2626	Miami, F	L 33101-2975
• •	SE e corporation is organized is: d to, event planning, lifestyle manag		nternational concierge services
VIP concierge services i	n the selected destination countries.	3132	
ARTICLE IV SHARE The number of shares of s ARTICLE V INITIA Name and Title Address	stock is: LOFFICERS AND/OR DIRECTOL John C. H. Wright, President/Treas		Thomas G. James, Chairman/Secretary 1400 NE 103 Street Miami Shores, FL 33138-2626
Name and Title: Address			
Name and Title:			:

Name and Title:		Name and Title:	FILED	
Address			2016 SEP 22 PM 4: 21	
			SELA PARY OF STATE TALLAHADSEE, FLORIDA	
4RTICLE VI The name and l	REGISTERED AGENT Florida street address (P.O. Box NOT acceptable	e) of the registered agent is:		
Name:	Thomas G. James			
Address:	1400 NE 103 Street			
	Miami Shores, FL 33138			
<u>ARTICLE VII</u>	INCORPORATOR			
The <u>name and a</u>	address of the Incorporator is:			
Name:	Thomas G. James			
Address:	1400 NE 103 Street			
	Miami Shores, FL 33138-2626			
Effective date, i	EFFECTIVE DATE: 10/1/2016 if other than the date of filing: date is listed, the date must be specific and ca filing.)	(OPTION nnot be more than five bu		
	te inserted in this block does not meet the applica effective date on the Department of State's recor		nents, this date will not be listed as	
	amed as registered agent to accept service of pro I am fanáliar with and accept the appointment as			
	Fromon & James	_	9/18/2016	
	Required Signature/Registered Agent		Date	
I submit this de document to the	ocument and affirm that the facts stated herein e Department of State constitutes a third degree f	are true. I am aware that a elony as provided for in s.8.	the false information submitted in 17.155, F.S.	
	Grown & James	-	9/18/2016	
Rea	inted Signature/Incorporator		Date	