

P16000093542

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

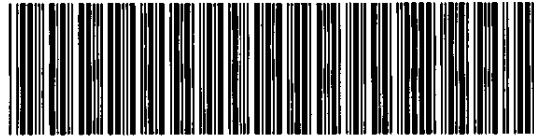
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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11/23/16--01006--012 **78.75

C. GOLDEN

NOV 28 2016

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16 NOV 28 AM 11:16
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1000 Ponce de Leon Blvd. Suite: 105
Coral Gables, FL 33134
Phone: 305-444-4994
Email: filing@ecfsfiling.com

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CORPORATION NAME(S) & DOCUMENT NUMBERS(S):

1. Jet-Set Airlines Inc.

(CORPORATE NAME)

(DOCUMENT #)

2.

(CORPORATE NAME)

(DOCUMENT #)

3.

(CORPORATE NAME)

(DOCUMENT #)

☐ Walk-In

☒ Pick up time: _____

☒ Certified Copy

☐ Certificate Of Status

New Filings	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	Non-Profit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Other:

Amendments	
<input type="checkbox"/>	Amendments
<input type="checkbox"/>	Resignation
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Other:

Other Filings	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Apostille:
<input type="checkbox"/>	Other:

Examiners Initials

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16 NOV 28 PM 4:55

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: Jet-SET Airlines Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

1300 N.W. 84 AVE
Doral, Florida 33176

(same)

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Aviation Services &
any and all Lawful Business

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: _____

Address _____

Name and Title: Alberto Osorio (VP)

Address 1300 N.W. 84 AVE
Doral, Florida 33176

Name and Title: Luis Carlos Oredosgoitia (D)

Address 1300 N.W. 84 AVE
Doral, Florida 33176

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: Alberto Osorio
Address: 1300 N.W. 84 AVE
Doral, Florida 33176

ARTICLE VII INCORPORATOR

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

Name: Alberto Osorio
Address: 1300 N.W. 84 AVE
Doral, - Florida 33176

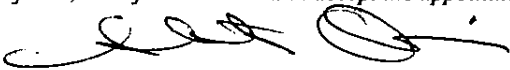
ARTICLE VIII EFFECTIVE DATE:

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.)

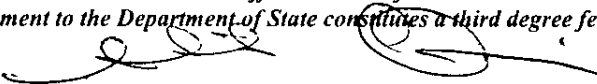
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

11/23/2016
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

11/23/2016
Date

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