Division of Corporations Electronic Filing Cover Sheet

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To:		
	Division of Corporations	
	Fax Number	: (850)617-6381
From;		
	Account Name	: LAZARUS CORPORATE FILING SERVICE, INC.
	Account Number	: I29000000019
	Phone	: (305)552-5973
	Fax Number	: (305)675-5944
Ente	er the email addr annual report ma	ess for this business entity to be used for future llings. Enter only one email address please.
	Email Address:	

FLORIDA PROFIT/NON PROFIT CORPORATION PEOPLEXPRESS TRAVEL, INC

Certificate of Status	0	
Certified Copy	1	
Page Count	03	
Estimated Charge	\$78.75	

2018 DEC -5 PM 121,30
SECRETARY OF STATE

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Corporate Filing Menu

Help



ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)
EFFECTIVE: 1-1-19
ARTICLE I NAME: The name of the appropri
PEOPLEXPRESS TRAVEL INC
ARTICLE II PRINCIPAL OFFICE:
The principal street address and mailing address is:
136 51 WECT DOOR 11
NORTH-MIAMI, FC 33/61
- 1001011- 11 11 1 1 5 37611
ARTICLE III SHARES: The number of shares of stock is:
ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:
FRANTZ ROCOURT P
. — 200101
ARTICLE V INITIAL DECISTEDED AGENCY
ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS: The name and Florida street address (PO P.
The name and Florida street address (PO Box not acceptable) of the registered agent is:
127051 101
13051 W. Dixie Hwy
North Migmi FL 33160
ARTICLE VI INCORPORATOR; The name and address of the Incorporator is:
trantz Rocourt
_ 13651 W. DIXIE HILL
North Minn E 33 unt
UNICO IT MUNITEDITION

12-05-2018

Required Signatures:

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

Registered Agent 12-05-2018

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.