## P19000045389

(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:							





400329395364

05/22/19 --01002 -008 - \*\*/0.00

C RICO MAY 22 2019 38 th He 22 km 61

April 29, 2019

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

Re: Esplugas Ibis Express Inc.

To whom it may concern:

By means of this letter I am advising that I have no intentions of re-instating the above mentioned dissolved corporation.

Should you have any questions or concerns please do not hesitate to contact me.

Sincerely,

Manuel/T./ Esplugas

JOSE L. RUIZ Notary Public - State of Florida Commission # FF 938168

My Comm. Expires Nov 22, 2019 Bonded through National Notary Assn. CONTROLLED OF THE ST.

## **COVER LETTER**

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

SUBJECT:	SPLU	GAS IBIS EXPRESS INC					
SOBJECT		(PROPOSED CORPOR	ATE NAME - <u>MUST INCL</u>	UDE SUFFIX)			
Enclosed are an	orig	inal and one (1) copy of the ar	ticles of incorporation and	d a check for:			
S70.00 Filing Fee		☐ \$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy	Filing Fec, Certified Copy & Certificate of Status			
			ADDITIONAL COPY REQUIRED				
FROM	MA :	RIA E RUIZ					
		Name (Printed or typed)					
	7750 SW 117TH AVE						
	Address						
	MIAMI, FLORIDA 33183						
	City, State & Zip						
	305	595-2407					
		Daytime 1	Telephone number				
		E-mail address: (to be use	ed for future annual report r	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)

TICLE II PRI	NCIPAL OFFICE				
Principal street address		Mai	Mailing address, if different is:		
311 SW 4 TERR	ACE	7750 SW 1	7750 SW 117TH AVE SUITE 201D		
MAMI FLORIDA 33185		MIAMI FLO	MIAMI FLORIDA 33183		
TICLE III PUR purpose for which	POSE ANY ANE the corporation is organized is:	ALL LEGAL PURPO	DSES		
TICLE IV SHA number of shares	<u>RES</u> 100 @ \$1.00 EA of stock is:		(2) %. (1)		
number of shares of	IAL OFFICERS AND/OR DIRECTORS		4 民美 22 万年		
number of shares of shares of shares of shares of share and Ti	IAL OFFICERS AND/OR DIRECTORS  MANUEL T. ESPLUGAS PRES  15611 SW 24 TERRACE	Name and Title:	18 (2) The		
number of shares of	IAL OFFICERS AND/OR DIRECTORS  MANUEL T. ESPLUGAS PRES  15611 SW 24 TERRACE		4 民美 22 万年		
number of shares of shares of shares of shares of share and Ti	AL OFFICERS AND/OR DIRECTORS tle:  15611 SW 24 TERRACE	Name and Title:	4 民美 22 万年		
number of shares	IAL OFFICERS AND/OR DIRECTORS  MANUEL T. ESPLUGAS PRES  15611 SW 24 TERRACE  MIAMI FLORIDA 33185	Name and Title: Address: 	18:4 18.3 (23.5%)		
number of shares	IAL OFFICERS AND/OR DIRECTORS  MANUEL T. ESPLUGAS PRES  15611 SW 24 TERRACE  MIAMI FLORIDA 33185	Name and Title: Address: Name and Title: Address:	18:4 18.3 (23.5%)		
number of shares of shares of shares of shares of share and Ti Address  Name and Title Name and Title Share and Title Share and Share of shares of	MANUEL T. ESPLUGAS PRES  15611 SW 24 TERRACE  MIAMI FLORIDA 33185	Name and Title: Address: Name and Title: Address:	18:4 15 3 18.		
number of shares	MANUEL T. ESPLUGAS PRES  15611 SW 24 TERRACE  MIAMI FLORIDA 33185	Name and Title: Address: Name and Title: Address:	18:4 KZ 28:31.		

Name and Title:		Name and Title:			
Addre	ess	Address:			
<u>ARTICLE VI</u>					
	Florida street address (P.O. Box NOT accept MANUEL T. ESPLUGAS	table) of the registered agent is:			
Name: Address:	15611 SW 24 TERRACE				
Address.	MIAMI FLORIDA 33185		<del>9</del> <del>1</del>		
<u>ARTICLE VII</u>	INCORPORATOR		4 22 A		
The <u>name and</u>	address of the Incorporator is:				
Name:	MANUEL T. ESPLUGAS		2 3 Aries		
Address:	15611 SW 24 TERRACE	<del></del>			
	MIAMI FLORIDA 33185				
Effective date, (If an effective filing.) <u>Note:</u> If the da	if other than the date of filing:  date is listed, the date must be specific and the inserted in this block does not meet the apple effective date on the Department of State's re-	cannot be more than five days prior of the cannot be more than five days prior of the cannot be more than five days prior of the cannot be more than five days prior of the cannot be more than five days prior of the cannot be more than five days prior of the cannot be more than five days prior of the cannot be more than five days prior of the cannot be more than five days prior of the cannot be more than five days prior of the cannot be more than five days prior of the cannot be more than five days prior of the cannot be more than five days prior of the cannot be more than five days prior of the cannot be more than five days prior of the cannot be more than five days prior of the cannot be cannot b	·		
Having been no this certificate,	amed as registered agent to accept service of a lamiliar with and accept the appointmen	process for the above stated corporation it as registered agent and agree to act in i	at the place designated in this capacity		
-pslye/		04	4/28/2019		
101	Required Signature/Registered Age	ent	Date		
I submit this ded document to the	ocument and affirm that the facts stated here e Department of State constitutes a third degre	in are true. I am aware that the false in the felony as provided for in s.817.155, F.S	nformation submitted in a S.		
	1 /0/21	0	04/28/2019		
Req	uired Signature/Incorporator		Date		