

1/14/2020

Division of Corporations

Florida Department of State

P2001500002829

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FLORIDA PROFIT/NON PROFIT CORPORATION
EXOTIC & TOURS TICKETS CORP

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1/15/20
[Signature]

ARTICLES OF INCORPORATION

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

ARTICLE I NAME EXOTIC TOURS & TICKETS CORP

The name of the corporation shall be: _____

ARTICLE II PRINCIPAL OFFICEPrincipal street address

Mailing address, if different is: _____

282 WEST 24th STREET

HIALEAH, FL 33010

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY AND ALL LAWFULL BUSINESS.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: LUIS ALBERTO PEREZ GOMEZ (P)

Name and Title: _____

Address 282 WEST 24th STREET

Address: _____

HIALEAH, FL 33010

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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Name and Title: _____ Name and Title: _____
Address: _____ Address: _____

ARTICLE VI REGISTERED AGENTThe name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: LUIS ALBERTO PEREZ GOMEZ
Address: 282 WEST 24th STREET
HIALEAH, FL 33010

ARTICLE VII INCORPORATORThe name and address of the Incorporator is:

Name: LUIS ALBERTO PEREZ GOMEZ
Address: 282 WEST 24th STREET
HIALEAH, FL 33010

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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 days prior or 90 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.

 _____ 01/13/2020
Required Signature/Registered Agent 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.

 _____ 01/13/2020
Required Signature/Incorporator Date

E

Kevin L. Deeb, Esquire
500_South_Dixie_Highway,_Suite_304
Coral_Gables,_Florida_33146
Telephone:_(305)_670-1188_Ext._103
Facsimile:_(305)_572-7085
Email:_kevin@deebpa.com

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