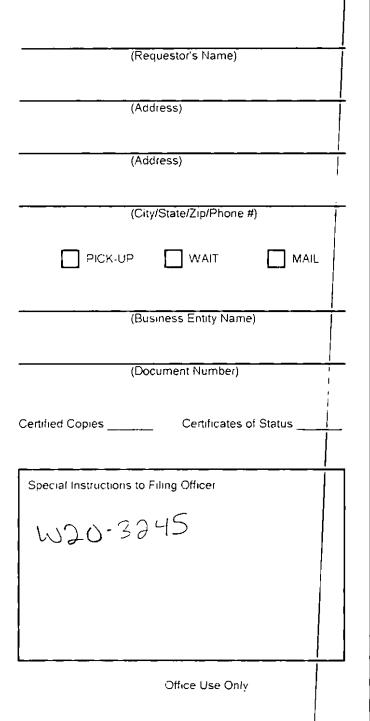
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DATE: 1/14/20

NAME: YOURWAY MANAGÉMENT INC

TYPE OF FILING: ARTICLES

COST:

70.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HO

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

| ARTICLE 1 NAME The name of the corporat | tion shall be: Yourway Mana | gement INC | |
|---|-------------------------------------|----------------------|--|
| ARTICLE II PRINC | | | Mailing address, if different is: |
| ARTICLE III PURPO The purpose for which the | DSE he corporation is organized is: | Hotel Management | |
| | | | 2020 SECR |
| | | | ARE SEE TO THE TOTAL PROPERTY OF THE TOTAL P |
| ARTICLE IV SHARE The number of shares of | ES stock is: 1000 | | 1 6: 4.9 1 6: 4.9 |
| | LOFFICERS ANDVOR DIRECT | TORS Name and Title | . Jay Patel D |
| Address | 3609 Barington Dr. | Address: | 410 Eagle Run Rd. |
| | Allentown, PA 18104 | | Newark, DE 19702 |
| Name and Title: | | Name and Title | |
| Address | | Address: | |
| | | | |
| Name and Title: | | Name and Title: | |
| Address | 1 | Address: | |
| | | | |
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| Name and Title: | | Name and Title: |
|--|--|--|
| Address | | Address: |
| | | |
| | | |
| | | |
| ARTICLE | VI REGISTERED AGENT | |
| | and Florida street address (P.O. Box NOT | acceptable) of the registered agent is: |
| Name: | Gulamali Jaffer | <u> </u> |
| Address: | 3545 Rice Lake Loop | |
| | Longwood, FL 32779 | |
| ATIOLE | | |
| ARTICLE VII INCORPORATOR | | |
| The name | and address of the Incorporator is: | |
| Name: | Laura Hayes | |
| Addres | 1013 Centre Rd. Suite | 403-A |
| | Wilmington, DE 19805 | |
| | | |
| ARTICLE VIII EFFECTIVE DATE: Effective date, if other than the date of filing: | | (OPTION IN |
| (If an effec | tive date is listed, the date must be sper | ific and cannot be more than five days prior or 90 days after the |
| filing.) | | |
| Note: If the | e date inserted in this block does not meet int's effective date on the Department of S | the applicable statutory filing requirements, this date will not be listed as blate's records. |
| Having bee | n named as registered agent to accept soon | the of process for the above stated corporation at the place designated in this |
| certificate, l | am familiar with and accept the appointm | neni as registered agent and agree to act in this capacity |
| | | 1/18/20 |
| | Required Signature/Registe | ared Agent Date |
| I submit thi | s document and affirm that the facts sta | ted herein are true. I am aware that the false information submitted in a |
| document to | the Department of State constitutes a this | rd degree felony as provided for in 2817.155, F.S. |
| Remired | gnature/incorporator | 1/13/20 |
| dance 21 | Program e incorbourior | Date / |
| | · · · · · · · · · · · · · · · · · · · | |