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	Division of Cor Fax Number	: (850)617-6381	
From:	Account Name Account Number Phone Fax Number	: LAZARUS CORPORATE FILING SERVICE, INC. : 120000000019 : (305)552-5973 : (305)675-5944	2020 DEC -4
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## FLORIDA PROFIT/NON PROFIT CORPORATION 1 MAVEL SERVICE, CORP

Certificate of Status	0
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ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

TICLE II PRIN	<u>CIPAL OFFICE</u>	Mailing address, if different is:			
<u> </u>	Principal street address	Mating address, if other fails.			
79 SE 8th Pl					
omestead, FL 33035		Homestead	I, FL 33035		
RTICLE III PURP	OSE the corporation is organized is:				
NY AND ALL LAWFL					
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				44	
				 ري	•
ARTICLE IV SHA The number of shares	<u>RES</u> 100 of stock is:				
The number of shares ARTICLE V INIT	<u>RES</u> 100 of stock is:	Name and Title	VP: IVAN F. ESTRADA 14330 SW' 285TH. ST.		• •
The number of shares	of stock is:	Name and Title	·		·····
The number of shares ARTICLE V INIT Name and T Address	of stock is: TAL OFFICERS AND/OR DIRECTORS P: LEIDY Y. VASQUEZ 1279 SE 8th Pl Homestead, FL 33035	Name and Title Address: 	14330 SW' 285TH. ST. Homesterid, FL 33033		
The number of shares ARTICLE V INIT Name and T Address	of stock is: <u>TAL OFFICERS AND/OR DIRECTORS</u> P: LEIDY Y. VASQUEZ 1279 SE 8th Pl	Name and Title Address:  Name and Title	14330 SW' 285TH. ST. Homestead, FL 33033		
The number of shares <u>ARTICLE V INIT</u> Name and T Address Name and T	of stock is:	Name and Title Address:  Name and Title Address:	14330 SW 285TH. ST. Homestend, FL 33033		
The number of shares <u>ARTICLE V INIT</u> Name and T Address Name and T Address	of stock is:	Name and Title Address: Name and Title Address:	14330 SW' 285TH. ST. Homesterid, FL 33033		

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Name an	d Title:	Name and Title:	Name and Title:				
Address							
<u>ARTICLE VI</u> The <u>name and F</u>	<u>REGISTERED AGENT</u> Jorida street address (P.O. Box NOT acc	eptable) of the registered agent is:	20 0EC				
Name:							
Address:	1279 SE 8th Pl						
	Homestead, FL 33035		923 923 934				
<u>ARTICLE VII</u>	INCORPORATOR		بة + آل بو⊳				
The name and a	address of the Incorporator is:						
Name:							
Address:	1279 SE 8th Pi						
Audioss.	Homestead, FL 33035						
<u>ARTICLE VII.</u> Effective date	<u>EFFECTIVE DATE:</u> 12/03/202 if other than the date of filing:	, (OPTIONAL)	00 door ofter the				

Effective date, if other than the date of filling. (If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filling.)

<u>Note:</u> 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, ham familiar with and accept the appointment as registered agent and agree to act in this capacity

Roquired Signature/Registered Agent

Date

12/03/2020

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.

Signature/Incorporator

12/03/2020

Date