Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H220003981993)))



H220003981993ABCA

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page, Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number ; (850)617-6381

From:

Account Name : EXPERTAX

Account Number : 110200000010

Phone : (407)777-7470
Fax Number : (321)286-9743

**Enter the email address for this business entity to be used for future

annual report mailings. Enter only one email address please.**

Email Address:_

FLORIDA PROFIT/NON PROFIT CORPORATION TRAVEL ZONE ONLINE INC

1
0
04
\$78.75

Electronic Filing Menu Corporate Filing Menu

Help

ري

<u>ن</u> دع



November 28, 2022

FLORIDA DEPARTMENT OF STATE
Division of Corporations

EXPERTAX

SUBJECT: TRAVEL ZONE ONLINE INC

REF: W22000146180

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Dil Sultana
Regulatory Specialist II

FAX Aud. #: E22000398199 Letter Number: 622A00026175

H22000 3981993 **COVER LETTER**

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

SUBJECT: TRAV	VEL ZONE ONLINE INC (PROPOSED CORPORATION)	E NAME – <u>MUST INCL</u>	JDE SUFFIX)				
Enclosed are an orig	ginal and one (1) copy of the article	es of incorporation and	a check for:				
☐ \$70.00 Filing Fee	☑ \$78.75 Filing Fœ & Certificate of Status	S78.75 Filing Fee & Certified Copy ADDITIONAL CO	& Certificate of Status				
	ILBERTO REŸES Name (469 w VINE ST	Printed or typed)					
Address							
KISSIMMEE, FL, 34741							
City, State & Zip							
.x.	Daytime Telephone number						
E-mail address: (to be used for future annual report notification)							

NOTE: Please provide the original and one copy of the articles.

H22000398199 3

ARTICLES OF INCORPORATION

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

EH PRINC			Name of the Control of the State of the Stat
1	rincipal <u>street</u> address		Mailing address, if different is:
W VINE ST		3469	W VINE ST
IMMEE, FL,	34741	KISS	SIMMEE, FL, 34741
LE III PUBPO pase for which th	SE e corporation is organized is: TECHNO	LOGY	
'LE IV' SHARE	Stock is: 100		
LEIV SHARE	tock is: 100		
niber of shares of s	ES Block is: 100 L OFFICERS AND/OR DIRECTORS		·.
nber of shares of s	nock is: 100 LOFFICERS AND/OR DIRECTORS	Name and Ti	tle:GILDA ESPINA ALVIARE
nber of shares of s LE V INITIA Name and Title	HOCK is: 100 LOFFICERS AND/OR DIRECTORS GILBERTO REYES - MBR		tle:GILDA ESPINA ALVIARE: 3469 W VINE ST
nber of shares of s LE V LNITLA Name and Title Address	HOCK is: 100 LOFFICERS AND FOR DIRECTORS GILBERTO REYES - MBR 3469 W VINE ST		3469 W VINE ST
nber of shares of s LE V LNITLA Name and Title Address	HOCK is: 100 LOFFICERS AND/OR DIRECTORS GILBERTO REYES - MBR		3469 W VINE ST KISSIMMEE, FL, 34741
nber of shares of s LE V INITIA Name and Title Address	HOCK is: 100 LOFFICERS AND FOR DIRECTORS GILBERTO REYES - MBR 3469 W VINE ST		3469 W VINE ST KISSIMMEE, FL, 34741
nber of shares of s LE V INITIA Name and Title Address	ROCK is: 100 ROFFICERS AND FOR DIRECTORS GILBERTO REYES - MBR 3469 W VINE ST KISSIMMEE, FL, 34741	Address:	3469 W VINE ST KISSIMMEE, FL, 34741
nber of shares of shares of shares and Title Address Name and Title:	HOCK is: 100 LOFFICERS AND FOR DIRECTORS GILBERTO REYES - MBR 3469 W VINE ST	Address: Name and Ti	3469 W VINE ST KISSIMMEE, FL, 34741
nber of shares of s LE V LNITLA Name and Title Address	ROCK is: 100 ROFFICERS AND FOR DIRECTORS GILBERTO REYES - MBR 3469 W VINE ST KISSIMMEE, FL, 34741	Address:	3469 W VINE ST KISSIMMEE, FL, 34741
nber of shares of shares of shares and Title Address Name and Title:	ROCK is: 100 ROFFICERS AND FOR DIRECTORS GILBERTO REYES - MBR 3469 W VINE ST KISSIMMEE, FL, 34741	Address: Name and Ti	3469 W VINE ST KISSIMMEE, FL, 34741
nber of shares of states of states of states of shares and Title Address Name and Title:	ROCK is: 100 ROFFICERS AND FOR DIRECTORS GILBERTO REYES - MBR 3469 W VINE ST KISSIMMEE, FL, 34741	Address: Name and Ti	3469 W VINE ST KISSIMMEE, FL, 34741
nber of shares of shares of shares and Title Address Name and Title:	ROCK is: 100 ROFFICERS AND FOR DIRECTORS GILBERTO REYES - MBR 3469 W VINE ST KISSIMMEE, FL, 34741	Address: Name and Ti	3469 W VINE ST KISSIMMEE, FL, 34741
nber of shares of states of states of states of shares and Title Address Name and Title: Address	ROCK is: 100 ROFFICERS AND FOR DIRECTORS GILBERTO REYES - MBR 3469 W VINE ST KISSIMMEE, FL, 34741	Address: Name and Til Address:	3469 W VINE ST KISSIMMEE, FL, 34741
nber of shares of states of states of states of shares and Title Address Name and Title: Address	HOCK is: 100 LOFFICERS AND FOR DIRECTORS GILBERTO REYES - MBR 3469 W VINE ST KISSIMMEE, FL, 34741	Address: Name and Ti	3469 W VINE ST KISSIMMEE, FL, 34741 C) Gle:

H22000 398199 3

Name ar	d Title:	Name and Title:	
Address		_ Address:	
	REGISTERED AGENT	file modeland agent in	
inc name and r	Torida street address (P.O. Box NOT acceptable) o	I the rogistered agent is.	
Name:	GILBERTO REYES	_	
Address:	3469 W VINE ST	_	
	KISSIMMEE, FL, 34741	_	
ARTICLE VII	INCORPORATOR		
The name and a	address of the incorporator is:		
Name:	GILBERTO REYES		
Address:	3469 W VINE ST		
	KISSIMMEE, FL, 34741	•••	
ARTICLE VIII	EFFECTIVE DATE:		
Effective date, i	f other than the date of filing: date is listed, the date must be specific and cann	(OPTIONAL)	ofter the
(it an elicetive filing.)	date is nated' the date miner on sheetile and emin	of he winte than tive mays him, or so make	-: -:
	te inserted in this block does not meet the applicable	e statutory filing reminements, this date will:	not be listed as
the document's	effective date on the Department of State's records		<u> </u>
	•		•
Having been no	med as registered agent to accept service of process, familiar with and accept the appointment as registe	for the above stated corporation at the place a tred agent and agree to act in this capacity	esignateli in ini. Co
tringituit, i um	GR		~~~
······	Required Signature/Registered Agent	11/21/2	022 Pate
	• -		
I submit this de document to the	ocument and affirm that the facts stated herein are Department of State constitutes a third degree felo	e true. I am aware that the Jaise information ny as provided for in 5.817.155, F.S.	i suomniea in i
	GR	11/21,	/2022
Required Signs	ture/Incorporator	Date	***************************************