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CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Laithier Vacation	n Rental Inc		
Please Debit FCA	\ 000000003 For:	70	
Thank you Seth ?	Neeley		
At Ja	. teres		Art of Inc. File LTD Partnership File Foreign Corp. File L.C. File Fictitious Name File Trade/Service Mark Merger File Att. of Amend. File RA Resignation
A			Dissolution / Withdrawal Annual Report / Reinstatement Cert. Copy Photo Copy Certificate of Good Standing Certificate of Status Certificate of Fictitious Name Corp Record Search Officer Search Fictitious Search
Signature			Fictitious Owner Search Vehicle Search
D 13			Driving Record
Requested by:			UCC 1 or 3 File UCC 11 Search
Name	Date	Time	UCC 11 Search
Walk-In	Will Pick	Up	Courier

COVER LETTER

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

SUBJECT:	LAITHIER VACATION RENTAL INC (PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)				
Enclosed are an oris	ginal and one (1) copy of the art		_		
⊠ \$70.00 Filing Fee	S78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy ADDITIONAL CO	☐ \$87.50 Filing Fee. Certified Copy & Certificate of Status		
UNON	EPGD	Attorneys at Law, P.A.	();		
FROM:	Nam 777 SW 1	e (Printed or typed) 37th Ave. Suite 510	19:17		
	Miami.	Address . Florida 33135 . State & Zip			
		6) 837-6787 Telephone number			
		epgdlaw.com d for future annual report i	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)

The name of the corporatio	n shall be: LAITHIER VACATION F	RENTAL INC	
	incipal street address	_	ddress, if different is:
1465 NE 54th St, Fort Lac	iderdale, FL 33334		
	E corporation is organized is: Vacation	rentals	
			2021
ARTICLE IV SHARES The number of shares of ste			2024 JUH 25
	OFFICERS AND/OR DIRECTORS	_	
Name and Title:_	Maxime Laithier, President	Name and Title:	13
Address	16330 rue de l'esplanade,	Address:	
_	Mirabel, QC, CAN, J7N0J8		
_			
Name and Title:		Name and Title:	
Address			
Name and Title:		/ Name and Title:	
Address		Address:	
_			

Name and	l Title:	Name and Title:	
Address		Address:	
ADTICLE VI L	<u>REGISTERED AGENT</u>		
The name and Flo	orida street address (P.O. Box NOT accepta	ble) of the registered agent is:	
Name:	EPGD Attorneys at Law, P.A.		•
Address:	777 SW 37th Ave., Suite 510		
	Miami, Florida 33135		
<u>ARTICLE VII - I</u>	<u>NCORPORATOR</u>		
	dress of the Incorporator is:		2924
Name:	Grant Kaplan, Esq.		25 HU 129
Address:	777 SW 37th Ave., Suite 510		11
	Miami, Florida 33135		1.6 (4)
ARTICLE VIII	EFFECTIVE DATE:		
(If an effective da	ther than the date of filing:	(OPTIONA cannot be more than five days	L) prior or 90 days after the
filing.)			
Note: If the date if the document's eff	nserted in this block does not meet the appli ective date on the Department of State's rec	cable statutory filing requirement ords.	nts, this date will not be list
Having been name	d as registered agent to accept service of pro	cess for the above stated cornora	tion at the place decisionated
certificate, I am fa	miliar with and accept the appointment as re	gistered agent and agree to act in	n this capacity
			06/20/2024
	Required Signature/Registered Agent	1	Date
I submit this docu	ment and affirm that the facts stated herein	are true. I am aware that the	false information submitte
а <i>оситені 10 іне 1)</i> ;	epartment of State constitutes a third degree	fetony as provided for in s.817.1.	55, F.S.
Daguirad Ci	TS-		06/20/2024
Required Signature	zincorporator =	I.)ate