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2024-11-22 08:59:35 CST

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From: Naomi Ostopowitz

P24 000071494

Florida Department of State
Division of Corporations
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TALLAHASSEE, FLORIDA

**FLORIDA PROFIT/NON PROFIT CORPORATION
ESCAPE TRAVEL CORP**

Certificate of Status	1
Certified Copy	0
Page Count	01
Estimated Charge	\$78.75

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

ARTICLE I NAME
The name of the corporation shall be: ESCAPE TRAVEL CORP

ARTICLE II PRINCIPAL OFFICE
Principal street address Mailing address, if different is:
390 MADISON AVE, FLOOR 21
NEW YORK, NY 10017

ARTICLE III PURPOSE
The purpose for which the corporation is organized is: Any and all lawful business.

ARTICLE IV SHARES
The number of shares of stock is: 200

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:	<u>BABACK HEMATIAN, PRESIDENT</u>	Name and Title:	
Address	<u>390 MADISON AVE, FLOOR 21</u>	Address:	
	<u>NEW YORK, NY 10017</u>		

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 AGENT**The **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:Name: Registered Agent Solutions, Inc.
Address: 2894 Remington Green Ln., Ste. A
Tallahassee, FL 32308**ARTICLE VII INCORPORATOR**The **name and address** of the Incorporator is:Name: BABACK HEMATIAN
Address: 390 MADISON AVE, FLOOR 21
NEW YORK, NY 10017FILED
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TALLAHASSEE, FLORIDA
2024 NOV 22 PM 4:11**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*

/s/ NAOMI OSTOPOWITZ, ASSISTANT SECRETARY ON BEHALF OF REGISTERED AGENT SOLUTIONS, INC.

Required Signature/Registered Agent11/22/2024_____
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.*

/s/ BABACK HEMATIAN

Required Signature/Incorporator11/22/2024_____
Date