

TRANSMITTAL LETTER

P99000025821

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
99 MAR 22 AM 11:47

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

SUBJECT: Hospitality Plus inc.
(Proposed corporate name - must include suffix)

400002813164--3
-03/22/99--01068--008
*****78.75 *****78.75

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

☐ \$70.00 Filing Fee
☒ \$78.75 Filing Fee & Certificate of Status

☒ \$78.75 Filing Fee & Certified Copy
☐ \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED

FROM: GARY GATES
Name (Printed or typed)

9515 Toledo lane
Address

FT Lauderdale FL 33324
City, State & Zip

954-472-8384
Daytime Telephone number

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

D. BROWN MAR 22 1999

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

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ARTICLE I NAME

The name of the corporation shall be: HOSPITALITY Plus inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

9515 Toledo lane
FT lauderdale FL 33324-5914

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

TEN (10)

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

GARY GATES
9515 Toledo lane
FT lauderdale FL 33324

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

GARY GATES
9515 Toledo lane r
FT lauderdale FL 33324

[Signature]
Signature/Incorporator

3-18-99
Date

(An additional article must be added if an effective date is requested.)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent

[Signature]
Signature/Registered Agent

3-18-99
Date