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(Requestor's Name)  3940 W. FLAGLER ST. 2nd FLOOR  (Address)  MIAMI, FL 33134 (305)444-4994  (City, State, Zip) (Phone #)	500003376895—-8 -08/30/0001018009 *****78.75 *****78.75
	office use only
corporation name(s) & DOCUMENT NUM  1. Sky Rides Para Sail	BER(S) (if known):
2. (Corporation Name)	(Document #)
3. (Corporation Name)	(Document #)
4. (Corporation Name)	(Document#)
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	NEW FILINGS
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1	NonProfit
	Limited Liability
	Domestication
	Other

OTHER FILNGS		
	Annual Report	
	Fictitious Name	
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Examiner's Initials

## ARTICLES OF INCORPORATION FOR SKY RIDES PARASAIL INC.

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

ARTICLE I NAME

The name of the corporation shall be:

SKY RIDES PARASAIL INC.

ARTICLE II PRINCIPAL OFFICE

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

1320 15th TERR. #15 MIAMI BEACH, FL 33139

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have shall be:

SHARES: 100 @ \$1.00

## ARTICLE IV REGISTERED AGENT

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

JESSE BAKKER 1320 15th TERR. #15 MIAMI BEACH, FL 33139

## ARTICLE V INCORPORATOR

The name(s) and address(es) of the incorporator(s) to these Articles of Incorporation are:

JESSE BAKKER
ALEJANDRO AGUILA
1320 15th TERR. #15
MIAMI BEACH, FL 33139

Signature of Incorporator

Date

18/29/00

Date

Date

ARTICLE VI DIRECTOR(S)/OFFICER(S)

The name(s) and address(es) of the director(s)/officer(s) to these Articles of Incorporation are:

JESSE BAKKER (P/S/T) ALEJANDRO AGUILA (V) 1320 15th TERR #15 MIAMI BEACH, FL 33139

Having been named as registered and to accept service of process for the above started corporation at the place designated in this certificate, I hereby accept the appointment as registered agent an 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 of Registered Agent