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To:
Division of Corporations
Fax Number : (850) 205-0381

From:
Account Name : ACE INDUSTRIES, INC.
Account Number : 070744001530
Phone : (305) 358-2571
Fax Number : (305) 373-7718

FLORIDA PROFIT CORPORATION OR P.A.

ARLENE'S TRAVEL, INC.

Certificate of Status	0
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Articles of Incorporation

Article 1: Name of Corporation: **ARLENE'S TRAVEL, INC.**

Address of Corporation: **8302 BARQUERO CT. N.
JACKSONVILLE, FL 32217**

Article 2: Capital Stock: The number of shares which the corporation has authorized to be outstanding at any one time is **1,000**, with a par value of **1.00**.

Article 3: REGISTERED AGENT: **ARLENE NEWMAN**

REGISTERED OFFICE: **8302 BARQUERO CT. N.
JACKSONVILLE, FL 32217**

*I am familiar with and hereby accept the duties and responsibilities as Register Agent for said corporation.



Signature of Registered Agent

Article 4: The Board of Directors are: (Board of Directors is NOT REQUIRED).
First listed is President, Second is Vice President, then Secretary/Treasurer.

1. P: **ARLENE NEWMAN, 8302 BARQUERO CT. N., JACKSONVILLE, FL 32217**

2.

3.

Article 5: The NAME and ADDRESS of the INCORPORATOR is:

**ARLENE NEWMAN
8302 BARQUERO CT. N.
JACKSONVILLE, FL 32217**

In witness whereof, I have subscribed my name:



Signature of Incorporator

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