

F01 000000 1947

TRANSMITTAL LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: EXOTIC TOURS INTERNATIONAL INC.  
(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

LORI M. WHITLOCK

(Name of Person)

DELAWARE BUSINESS INCORPORATORS, INC.

(Firm/Company)

3422 OLD CAPITOL TRAIL, SUITE 700

(Address)

WILMINGTON, DE 19808

(City/State and Zip code)

For further information concerning this matter, please call:

LORI M. WHITLOCK

(Name of Person)

at ( 302 ) 996-5819

(Area Code & Daytime Telephone Number)

**STREET ADDRESS:**

Registration Section  
Division of Corporations  
409 E. Gaines St.  
Tallahassee, FL 32399

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- ☐ \$70.00 Filing Fee    ☐ \$78.75 Filing Fee & Certificate of Status    ☒ \$78.75 Filing Fee & Certified Copy    ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

01 APR -9 PM 8:43

FILED

with 4/11

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT  
BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO  
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.*

1. EXOTIC TOURS INTERNATIONAL INC.

(Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)

2. DELAWARE

(State or country under the law of which it is incorporated)

3. 65-1057880

(FEI number, if applicable)

4. NOVEMBER 27, 2000

(Date of incorporation)

5. PERPETUAL

(Duration: Year corp. will cease to exist or "perpetual")

6. UPON AUTHORIZATION

(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.")  
(SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)

7. 1158 UNIVERSITY DRIVE

(Principal office address)

CORAL SPRINGS, FL 33071

(Current mailing address)

8. Representation of Hotels - Marketing

(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box **NOT** acceptable)

Name: PATRICIA TRIOLET-RODRIGUEZ

Office Address: 1158 UNIVERSITY DRIVE

CORAL SPRINGS

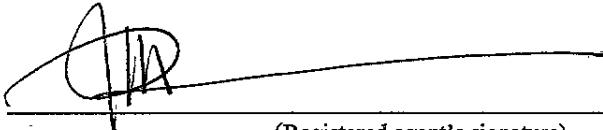
(City)

, Florida 33071

(Zip code)

10. Registered agent's acceptance:

*Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*



(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

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01 APR -9 PM 8:43  
SECRETARY OF STATE  
ALBANY, FLORIDA

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: PATRICIA TRIOLET

Address: 2158 University Drive  
Coral Springs FL. 33071

Vice Chairman: Blanca Sierra

Address: Cordero 1342 y Amazonas  
Quito Ecuador

Director: Andre Obiol

Address: Wilson 441 y 6 DE Diciembre  
Quito - Ecuador

Director: \_\_\_\_\_

Address: \_\_\_\_\_

B. OFFICERS

President: Patricia Triolet

Address: 2158 University Drive  
Coral Springs FL, 33071

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

Secretary: Francisco Rosero

Address: 4856 N. S. Road 7 Apt. 106, Coconut Creek, FL.

Treasurer: Andre Obiol

Address: Wilson 441 y 6 de Diciembre Quito, Ecuador

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. [Signature]  
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. PATRICIA TRIOLET PRESIDENT & CEO  
(Typed or printed name and capacity of person signing application)

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01 APR -9 PM 8:43  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Office of the Secretary of State

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I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF  
DELAWARE, DO HEREBY CERTIFY "EXOTIC TOURS INTERNATIONAL, INC."  
IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND  
IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR  
AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE FOURTH DAY OF  
APRIL, A.D. 2001.

FILED  
01 APR -9 PM 8:43  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



*Harriet Smith Windsor*  
Harriet Smith Windsor, Secretary of State  
AUTHENTICATION: 1063377

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DATE: 04-04-01