-00647-00963 (Requestor's Name) (Address) (Address) (City/State/Zip/Phone #) PICK-UP ☐ WAIT MAIL (Business Entity Name) (Document Number) Certified Copies _____ Certificates of Status_ Special Instructions to Filing Officer: MD 13/99

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TRANSMITTAL LETTER

	egistration Section Section (Section). Legistration of Corporation (Section).					
SUBJEC	CT: TOURAID		·		J**	<u> </u>
		(Na	me of corpo	ration - must inc	clude suffix	(3)
Dear Sir	or Madam:					
"Certific		", and check are sul				usiness in Florida," I foreign corporation to
Please re	turn all correspo	ondence concerning	this matter	to the following	;;	
NATAL	IE BARNETT	- , <u>, , , , , , , , , , , , , , , , , ,</u>			<u> </u>	e de la companya del companya de la companya de la companya del companya de la co
-	3		(Name o	f Person)		
TOURA	ID TRAVEL,	INC.			·	
			(Firm/Co	ompany)		
438 R	OUTE 3	<u>.</u>				<u> </u>
			(Add	ress)		
PLATT	SBURGH, NY	12901	City/State a	nd Zip code)		
For furth	er information c	oncerning this mat	ter, please ca	.ll:		
NATAL	IE BARNETT		at ((5 <u>18)</u> 563- <u>5</u>	605	. N. C. pt
	(Name	of Person)		(Area Cod	e & Daytim	ne Telephone Number)
R D 4	TREET ADDR Legistration Sect Division of Corpo 09 E. Gaines St. Callahassee, FL 3	ion orations		Registration Division of P.O. Box 6	f Corporati	ons
Enclosed	l is a check for the	he following amour	ıt:			
X \$70.0	00 Filing Fee	\$78.75 Filing Certificate of	-	\$78.75 Filing Certified Co	_	\$87.50 Filing Fee, Certificate of Status & Certified Copy



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

March 14, 2005

NATALIE BARNETT TOURAID TRAVEL, INC. 438 ROUTE 3 PLATTSBURGH, NY 12901

SUBJECT: TOURAID TRAVEL, INC. Ref. Number: W05000013199

We have received your document for TOURAID TRAVEL, INC. and your check(s) totaling \$70.00. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6967.

Letter Number: 605A00017398

Michelle Hodges Document Specialist

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. TOURAID TRAVEL, INC. (Enter name of corporation: must include "INCORPO"	ORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc,"
"Co," or "Corp.")	nation, something, controlling, mon, confi, mon,
	<u> Carlos de Adrianos de Carlos de Antonios de Carlos de </u>
(If name unavailable in Florida, enter alternate co	orporate name adopted for the purpose of transacting business in Florida)
2. NEW YORK	3. 14-1762774
(State or country under the law of which it is incor	porated) (FEI number, if applicable)
4. 05/07/93	5. PERPETUAL
(Date of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")
٤	
- (Date first transacte	d business in Florida, if prior to registration)
	1 & 607.1502, F.S., to determine penalty liability)
7. 438 ROUTE 3_PLATTSBURGH_NY 12	901
	Principal office address)
438 ROUTE 3 PLATTSBURGH NY 12	901 Current mailing address)
8. NEW FLORIDA RESIDENT EMPLOYEE	<u> </u>
(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 NOT acceptable)
TO DAVITO HAMOOOD	
Name: DAVID HANCOCK	
Office Address: 3221 SW 186	
MTD ANA D DT	ر بران بران المراد ا
MIRAMAR, FL (City)	, Florida 33029 (Zip code)
(-147)	
10. Registered agent's acceptance:	
	ervice of process for the above stated corporation at the place designated in istered agent and agree to act in this capacity. I further agree to comply
with the provisions of all statutes relative to the proper of	and complete performance of my duties, and I am familiar with and accept
the obligations of my position as registered agent.	A
AMX/	
(Reg	istered 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

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

which it is incorporated.

A. DIRECTORS
Chairman:
Address:
Vice Chairman:
Address:
Director:
Address:
Director:
Address:
B. OFFICERS
President: GEORGE BARNETT
Address: 640 POINT AU ROCHE ROAD PLATTSBURGH, NY 12901
Vice President: ANDREW BONICHI
Address: 20 RIVERWIND DRIVE REXFORD, NY 12148
Secretary: LISA DUMAR
Address: 3 MEADOWBROOK DRIVE MORRISONVILLE, NY 12962
Treasurer:
Address:
NOTE: If necessary, you may attach an addendum to the sportcation listing additional officers and/or directors.
13. (Signature of Director or Officer listed in number 12 of the application)
14. George Barnett President
(Typed or printed hame and capacity of person signing application)

State of New York Department of State

I hereby certify, that the Certificate of Incorporation of TOURAID TRAVEL, INC. was filed on 05/07/1993, with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation.

Witness my hand and the official seal of the Department of State at the City of Albany, this 14th day of April

NEW. ..

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