F00000000864

(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:		

Office Use Only

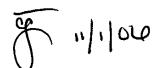
524-193 wde-45958



800080984798

10/19/05--01020--013 **87.50

O6 OCT 30 PH 4: 14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



COVER LETTER

TO: New Filing Section Division of Corporations		
	IS CHANTECLAIR, INC.	
(Name of corporati	on - must include suffix)	
Dear Sir or Madam:		
The enclosed "Application by Foreign Corporation for "Certificate of Existence," and check are submitted to transact business in Florida.		
Please return all correspondence concerning this matte	r to the following:	
MIRIAM AMADO		
(Name o	f Person)	
AGENCIA DE VIAGENS CHAN	ITECLAIR, INC.	
(Firm/Co		
1359 BROADWAY SUITE 1004		
(Add	ress)	
NEW YORK, NY 10018		
(City/State and Zip code) 显显显显		
For further information concerning this matter, please	call:	
MIRIAM AMADO at (212) 695-3514	
(Name of Person) (Area	Code & Daytime Telephone Number)	
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassec, FL 32314	
Enclosed is a check for the following amount:		
\$70.00 Filing Fee \$\ \tag{Certificate of Status}\$	\$78.75 Filing Fee & Sertified Copy Certified Copy Certified Copy	



FILED 06 007 30 PM 4: 15

SECRETARY OF STATE TALLAHASSEE, FLORIDA

Division of

October 19, 2006

MIRIAM AMADO 1359 BROADWAY SUITE 1004 NEW YORK, NY 10018

SUBJECT: AGENCIA DE VIAGENS CHANTECLAIR, INC.

Ref. Number: W06000045958

We have received your document for AGENCIA DE VIAGENS CHANTECLAIR, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The date of incorporation on the application must match the date on the certificate.

Please list the Federal Employer Identification number in the appropriate section of the application. If applied for, enter "applied for", or if not applicable, enter "N/A".

Please return the original and one copy of your document, along with 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) 245-6973.

Claretha Golden Document Specialist New Filing Section

Letter Number: 006A00062364



Florida Department of Agriculture & Consumer Services CHARLES H. BRONSON, Commissioner Tallahassee, Florida

September 12, 2006

Division of Consumer Services 2005 Apalachee Pkwy Tallahassee FL 32399-6500 Phone: 1-800-HELP-FLA

Fax: 850-410-3804

URL: http://www.800helpfla.com

Refer To: DTN1388941

AGENCIA DE VIAGENS CHANTECLAIR INC DBA: CHANTECLAIR TRAVEL 1359 BROADWAY RM 1004 NEW YORK, NY 10018-7893

RE: ARC Exemption

Dear Sir or Madam:

The information furnished to our office indicates you have been under contract with the Airlines Reporting Corporation for over three years, under the same ownership and control and do not offer vacation certificates. Based on this information, it appears you are exempt from the provisions of Sections 559.928 and 559.929, Florida Statutes, the Sellers of Travel Act.

This exemption will continue in effect until there is a change in your status which would require you to register and post bond. Should the circumstances change so as to make you ineligible for this exemption, please notify this office immediately.

Please be advised that a copy of this letter must be presented to the applicable occupational licensing officials to obtain your license. The Department will not be issuing this notice on an annual basis; therefore, you should retain this letter in order to renew your occupational license each year. In addition, this letter should be available to any Division investigators or law enforcement officers upon request.

If we may be of further assistance, please contact this office.

Sincerely,

CHARLES H. BRONSON COMMISSIONER OF AGRICULTURE

Louis W Harter

Louis W Harter Regulatory Consultant 850-410-3763 / 1-800-435-7352 (Florida Only)

harterw@doacs.state.fl.us

OCT 30 PN & 15

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. AGENCIA DE VIAGENS CHANTECLAIR, INC. (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co," or "Corp.")		
TOURLATINA (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)		
2. NEW YORK, NY 3. 13-3856599		
2. (State or country under the law of which it is incorporated) (FEI number, if applicable)		
4. November 14, 1995 (Date of incorporation) 5. Perpetual (Duration: Year corp. will cease to exist or "perpetual")		
6. Upon qualification		
(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)		
₇ 1359 Broadway - Suite 1004 - New York, NY 10018		
(Principal office address)		
1359 Broadway - Suite 1004 - New York, NY 10018		
(Current mailing address)		
8 Sales of Travel and Tours - products and services		
(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)		
Name: Antonio Folgueral		
10030 NW 44th Terrace #13-205		
Miami , Florida 33178 (City) (Zip code)		
(City) (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, further agree to comply with the provisions of all statutes relative to the proper and complete performance of my due and I am familiar with and accept the obligations of my position as registered agent.	I	
(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.

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

A. DIRECTORS	FILED :
Chairman:	-
Address:	
	SECRETARY OF STATE TALLAHASSEE, FLORIDA
Vice Chairman:	
Address:	
D.: O. Alver	
Director: Rui S. Alves	
Address: Rua Realengo, 133 - Apt. 15	1 - Sao Paulo, SP - Brazil
Director: Ivo B. Lins	
	ampos, 110 - Sao Paulo, SP - Brazil
Address: 1100 1100 1100 1100 1100 1100 1100 1	<u>p.o.,</u>
B. OFFICERS	
President: Rui S. Alves	
Address: Rua Realengo, 133 - Apt. 15	1 - Sao Paulo, SP - Brazil
Address.	
Vice President: Ivo B. Lins	
	ampos, 110 - Sao Paulo, SP - Brazil
Secretary: Miriam Amado	
Address: 6501 Douglaston Pkwy - Dou	glaston, NY 11362
Treasurer: Miriam Amado	
Address: 6501 Douglaston Pkwy - Dou	glaston, NY 11362
NOTE: If necessary, you may attach an addendum to the ap	oplication listing additional officers and/or directors.
13.	
(Signature of Director or Officer liste	
14. Miriam Amado, Vice President C	perations/deneral Manager

(Typed or printed name and capacity of person signing application)

State of New York Department of State } ss:

I hereby certify, that the Certificate of Incorporation of AGENCIA DE VIAGENS CHANTECLAIR, INC. was filed on 11/14/1995, under the name of CHANTECLAIR TRAVEL, INC., 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.

A Certificate of Amendment CHANTECLAIR TRAVEL, INC., changing its name to AGENCIA DE VIAGENS CHANTECLAIR, INC., was filed 01/02/1996.

WITNESS my hand and the official seal of the Department of State at the City of Albany, this 29th day of September two thousand and six.

Special Deputy Secretary of State

200610020018 41

FILED

OF OCT 30 PII 4: 15

SECRETARY OF STATE
SECRETARY OF STATE
ANALYSISE FILERIDA