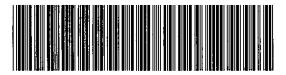
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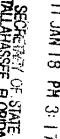
(Requestor's Name)				
(Address)				
,				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Schinda dopies				
Special Instructions to Filing Officer:				

Office Use Only



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COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: CruisingAgents.com in	C
	ration - must include suffix
Dear Sir or Madam:	
	n for Authorization to Transact Business in Florida," d Standing" and check are submitted to register the business in Florida.
Please return all correspondence concerning this r	natter to the following:
Mark Jacobs	
	ne of Person
Cruisingagents.com	
	n/Company
15325 chinaberry st.	
	Address
North Potomac, md 20878	
	tate and Zip code
mjacobs@cruisingagents.com	
	used for future annual report notification)
For further information concerning this matter, pl	ease call:
Mark Jacobs at (30	01 ₎ 318 2936
at (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 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 Sertificate of Status & Certified Copy



December 14, 2010

MARK JACOBS 15325 CHINABERRY ST NORTH POTOMAC, MD 20878

SUBJECT: CRUISINGAGENTS.COM INC

Ref. Number: W10000057819

We have received your document for CRUISINGAGENTS.COM INC and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The entity's date of incorporation/organization must be listed in the document.

The entity's period of duration must be listed on the application. Please insert the word "perpetual", if a specific date of dissolution or term of existence has not been specified.

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

The registered agent must sign accepting the designation.

The name and title of the person signing the document must be noted beneath or opposite the signature.

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

Please return the corrected 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) 245-6962.

Valerie Herring Regulatory Specialist II New Filing Section

www.sunbiz.org

Letter Number: 510A00028956

Division of Cornerations DO ROY 6327 Tollahassee Florida 32314

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.	Cruisingagents.com inc	
	(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")	
	(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)	
2.	Maryland 3. 263535974	
	(State or country under the law of which it is incorporated) (FEI number, if applicable)	
4	Aug 2008 5, no date perpetual	
٠.	(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")	
6	, n/a	
U.	(Date first transacted business in Florida, if prior to registration)	
	(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)	
7.	15325 Chinaberry st. North Potomac, md 20878	
	(Principal office address)	
	15325 Chinaberry st. North Poyomac, md 20878	
	(Current mailing address)	
0	Travel possibly	
ο.	(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)	
^	The state of the s	
У.	Name and street address of Florida registered agent: (P.O. Box NOT acceptable)	Training
	Name: 11ERSA VERVILE	ي حديد ريي مر
o	Name: Thersa Verville Stice Address: 8164 SE Croft cm. #82	₹.,
	Hope Sound, Florida 33 475	
	(City) (Zip code)	
10	0. 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.

(Peristered 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:	AltyRave				
A. DIRECTORS	ALC:				
Chairman: Mark Jacobs	11 JAN I R				
Address: 15325 chinaberry st. North Potomac, md 20878	11 JAN 18 PM 3: 16 LAHASSEE STATE				
Vice Chairman: Jason Jacobs	FLORIDA				
Address: 45 Kite ave, Huntington Beach, ca 92660					
·. ·					
Director:	·				
Address:					
Director:					
Address:	· · · · · · · · · · · · · · · · · · ·				
B. OFFICERS President: Mark Jacobs Address: 15325 Chinaberry st. North potomac, md 20878					
Vice President: Jason Jacobs	1				
Address 45 Kite ave. Huntington beach, ca 92660					
Address:	•				
Secretary: Christina Verville					
Address: 15325 Chinaberry st north potomac, md 20878					
Treasurer:					
Address:					
NOTE: If necessary, you may attach an addendum to the application listing additional of	ficers and/or directors.				
Signature of Director or Officer The officer or director signing this document (and who is listed in number 12 above) affirm are true and that he or she is aware that false information submitted in a document to the D third degree felony as provided for in s.817.155, F.S.	ns that the facts stated herein Department of State constitutes a				
14. Mark Jacobs President					

STATE OF MARYLAND Department of Assessments and Taxation

ON FINANCE TO STATE

I, PAUL B. ANDERSON OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF THE STATE OF MARYLAND, DO HEREBY CERTIFY THAT THE DEPARTMENT, BY LAWS OF THE STATE, IS THE CUSTODIAN OF THE RECORDS OF THIS STATE RELATING TO THE FORFEITURE OR SUSPENSION OF CORPORATIONS, OR THE RIGHTS OF CORPORATIONS TO TRANSACT BUSINESS IN THIS STATE, AND THAT I AM THE PROPER OFFICER TO EXECUTE THIS CERTIFICATE.

I FURTHER CERTIFY THAT CRUISINGAGENTS.COM INC., INCORPORATED OCTOBER 05, 2008, IS A CORPORATION DULY INCORPORATED AND EXISTING UNDER AND BY VIRTUE OF THE LAWS OF MARYLAND AND THE CORPORATION HAS FILED ALL ANNUAL REPORTS REQUIRED, HAS NO OUTSTANDING LATE FILING PENALTIES ON THOSE REPORTS, AND HAS A RESIDENT AGENT. THEREFORE, THE CORPORATION IS AT THE TIME OF THIS CERTIFICATE IN GOOD STANDING WITH THIS DEPARTMENT AND DULY AUTHORIZED TO EXERCISE ALL THE POWERS RECITED IN ITS CHARTER OR CERTIFICATE OF INCORPORATION, AND TO TRANSACT BUSINESS IN MARYLAND.

IN WITNESS WHEREOF, I HAVE HEREUNTO SUBSCRIBED MY SIGNATURE AND AFFIXED THE SEAL OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF MARYLAND AT BALTIMORE ON THIS OCTOBER 26, 2010.

Paul B. Anderson Charter Division

Paul B. Undam



301 West Preston Street, Baltimore, Maryland 21201 Telephone Balto. Metro (410) 767-1344 / Outside Balto. Metro (888) 246-5941 MRS (Maryland Relay Service) (800) 735-2258 TT/Voice Fax (410) 333-7097

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