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SECRETARY OF STATE
ALLAHASSEE, FLORIDA

MRD/13

COVER LETTER

| New Filing Section Division of Corporations |
|--|
| SUBJECT: CRUISE + SAA TNC. 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," or "Certificate of Good Standing" and check are submitted to register the bove referenced foreign corporation to transact business in Florida. |
| lease return all correspondence concerning this matter to the following: |
| MARK REYLING |
| Nome of Damon |
| YOUR TRAVEL CONCIERGES |
| Firm/Company |
| YOUR TRAVEL CONCIERGES Firm/Company 5570 STERRETT PL, SUITE-106 Address COLUMBIA, MP, 21044 City/State and Zip code |
| Address |
| COLUMBIA, MP. 21044 |
| City/State and Zip code |
| MAKK, REULING DZYTC, CVM E-mail address: (to be used for future annual report notification) |
| E-mail address: (to be used for future annual report notification) |
| or further information concerning this matter, please call: |
| 1ARK REJUNG at (301) 663-0485 Name of Person Area Code & Daytime Telephone Number |
| STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building Clifton Executive Center Circle Tallahassee, FL 32301 MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 |
| nclosed is a check for the following amount: |
| \$70.00 Filing Fee \$\Boxed{\sigma} \$78.75 Filing Fee & \$\Boxed{\sigma} \$78.75 Filing Fee & \$\Boxed{\sigma} \$87.50 Filing Fee, Certificate of Status & Certified Copy Certified Copy |

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. CRMISE & SEA INC.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.") Your TRAVEL CONCIERGES

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) 2. NARYLAND 3. 03-0507617 (State or country under the law of which it is incorporated) (FEI number, if applicable) (Date of incorporation)

5. PERPETUAL

(Duration: Year corp. will cease to exist or "perpetual") (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) STERRETT PL. SUTE 106 COLUMBIA MO. 21044 (Principal office address) (Current mailing address) SELLING OF CUNSUMER TRAVER

(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) JANA REULING Name: Office Address:

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.

12. Names and addresses of officers and/or directors

A. DIRECTORS

| Chairman (CRU, VIANA KRULING | |
|--|------------|
| Address: 3087 SANTORINI CT. NAPLAS, FL. | 34119 |
| Vice Chairman: NA | |
| | |
| Address: | S. S. |
| Director: NIA | |
| Address: | SERVE TO |
| | TO THE |
| Director: WA | 1 36 36 |
| | |
| Address: | |
| B. OFFICERS President: MARK REULW 6 Address: 10201 PEMBROOKE GREEW PL. COLUMBIA, MD. 21044 Vice President: NA Address: | |
| Audicss. | |
| Secretary: NA | |
| Address: | |
| Treasurer: | |
| Address: | |
| NOTE: If necessary, you may attach an addendum to the application listing additional officers at the second of the | |
| (Typed or printed name and capacity of person signing application) | |

STATE OF MARYLAND Department of Assessments and Taxation

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

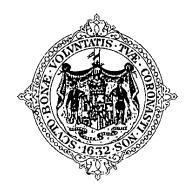
I, PAUL B. ANDERSON OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF THE STATE OF MARYLAND, DO HEREBY CERTIFY THAT THE DEPARTMENT, BY LAWS OF THE STATE, IS THE CUSTODIAN OF THE RECORDS OF THIS STATE RELATING TO THE FORFEITURE OR SUSPENSION OF CORPORATIONS, OR THE RIGHTS OF CORPORATIONS TO TRANSACT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

I FURTHER CERTIFY THAT CRUISE & SEA, INC., INCORPORATED FEBRUARY 10, 2003, 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 JUNE 04, 2013.

Paul B. Anderson Charter Administrator

Bal B. Undan



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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