

F 98000003561
Paralegal & Attorney Service Bureau, Inc.
d/b/a CAPITOL SERVICES
Requestor's Name

1406 Hays St., Suite 2

Address

Tallahassee, FL 32301 850/878-4734 or
850/656-3992

City/State/Zip

Phone #

400002547504--3

-06/04/98--01052--010

****122.50 ****122.50

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. Palace Resorts, Inc. (Corporation Name) (Document #)
2. _____ (Corporation Name) (Document #) W98-12843
3. _____ (Corporation Name) (Document #)
4. _____ (Corporation Name) (Document #)

☒ Walk in

☒ Pick up time 6/4

☒ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
<input checked="" type="checkbox"/>	NonProfit
<input checked="" type="checkbox"/>	Limited Liability
<input checked="" type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input checked="" type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

98 JUN -4 PM 12:14
SECRETARY OF STATE
TALLAHASSEE FLORIDA

FILED 3
6/23

Examiner's Initials



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State

June 4, 1998

Please back date

PARALEGAL & ATTORNEY SERVICE BUREAU, INC.
DBA CAPITOL SERVICES

SUBJECT: PALACE RESORTS, INC.
Ref. Number: W98000012843

We have received your document for PALACE RESORTS, INC. and your check(s) totaling \$122.50. However, the document has not been filed and is being retained in this office for the following:

The name designated in your document is not available. Therefore, the corporation must adopt an alternate name for use in the state of Florida. To adopt an alternate name the corporation must submit a corporate resolution by the board of directors adopting the alternate name for use in the state of Florida. Please note the corporate resolution must be signed by the chairman, vice chairman, or an officer of the corporation. The alternate name must contain a corporate suffix. Such suffixes include: Corporation, Corp., Incorporated, Inc., Company, and CO.

Please RETURN ALL DOCUMENTATION to the ATTENTION of the DOCUMENT SPECIALIST indicated.

Please return 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) 487-6958.

Lee Rivers
Document Specialist

Letter Number: 398A00031589

RECEIVED
98 JUN 23 AM 11:10
DIVISION OF CORPORATION

RESOLUTION OF BOARD OF DIRECTORS

(Please print or type)

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

I, the undersigned William L. Bricker, Jr. do hereby certify
(Name)


that this Resolution of the Board of Directors of _____
Palace Resorts, Inc.
(Corporate Name)

a corporation duly organized and existing under the laws of the State of Delaware
was duly adopted on June 19, 19 98.

Be it resolved, that Palace Resorts, Inc.
(Corporate Name)

organized and existing in the State of Delaware hereby adopts the name
Palace Resorts Travel, Inc. for use in Florida.

Dated: JUN 19, 1998


Signature of either Chairman, Vice Chairman or any officer

William L. Bricker, Jr., Assistant Secretary
Type or print name

**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. Palace Resorts, 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. Applied for
(FEI number, if applicable)
4. May 22, 1998
(Date of Incorporation)
5. Perpetual
(Duration: Year corp. will cease to exist or "perpetual")
6. Upon Qualification
(Date first transacted business in Florida. (SEE SECTIONS 607.1501, 607.1502, AND 817.155, F.S.))
7. c/o Curtis, Mallet-Prevost, Colt & Mosle
Attn: William L. Bricker, Jr., 101 Park Avenue, 35th Floor, New York, NY 10178
(Current mailing address)
8. Resort/Travel Business
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)
9. **Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)**
Name: NRAI Services, Inc.
Office Address: 526 East Park Avenue
Tallahassee, Florida, 32301
(Zip Code)

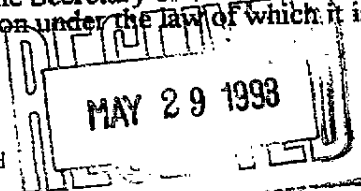
10. Registered agent's acceptance:

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.

Delia Taliento
(Registered agent's signature)

Delia Taliento, Asst. Secretary

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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TALLAHASSEE FLORIDA
SECRETARY OF STATE

12. Names and addresses of officers and/or directors: (Street address ONLY- P. O. Box NOT acceptable)

A. DIRECTORS (Street address only- P. O. Box NOT acceptable)

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: Roberto Chapur

Address: 520 Brickell Key Drive, Suite 0-204

Miami, Florida 33131-2607

Director: Jose Chapur

Address: 520 Brickell Key Drive, Suite 0-204

Miami, Florida 33131-2607

B. OFFICERS (Street address only- P. O. Box NOT acceptable)

President: Roberto Chapur

Address: 520 Brickell Key Drive, Suite 0-204

Miami, Florida 33131-2607

Vice President: _____

Address: _____

Secretary: Lourdez Rodriguez

Address: 520 Brickell Key Drive, Suite 0-204

Miami, Florida 33131-2607

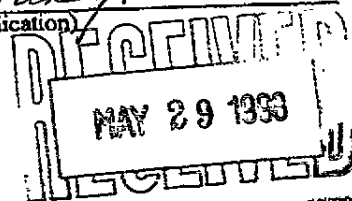
Treasurer: _____

Address: _____

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

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

14. LOURDEZ RODRIGUEZ, as Secretary
(Typed or printed name and capacity of person signing application)



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TALLAHASSEE FLORIDA

State of Delaware
Office of the Secretary of State


PAGE 1

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "PALACE RESORTS, 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 SECOND DAY OF JUNE, A.D. 1998.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "PALACE RESORTS, INC." WAS INCORPORATED ON THE TWENTY-SECOND DAY OF MAY, A.D. 1998.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.




Edward J. Freel, Secretary of State

2894721 8300

981210805

AUTHENTICATION:

9114336

DATE:

06-02-98

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SECRETARY OF STATE
TALLAHASSEE FLORIDA