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Florida Department of State

Division of Corporations **Public Access System** Katherine Harris, Scoretary of State

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To:

Division of Corporations

Fax Number

: (850)922-4001

From:

Account Name

: EMPIRE CORPORATE KIT COMPANY

Account Number : 072450003255

: (305)541-3694

Phone

Fax Number

: (305)541-3770

FLORIDA PROFIT CORPORATION OR P.A.

TRUE FISHING ADVENTURES, INC.

| Certificate of Status | _ 0_ |
|-----------------------|---------|
| Certified Copy | |
| Page Count | (04/ |
| Estimated Charge | \$78.75 |

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| (4) <u>ARTICLES OF INCORPORATION</u> |
| True Fishing Adventures, Inc. |
| (Name of Corporation) |
| |
| The undersigned subscriber(s) to these Articles of Incorporation, natural person(s) competent to contract, hereby form a corporation under the laws of the State of Florida. |
| ARTICLE I - CORPORATE NAME/ADDRESS |
| The name of the Corporation and address of the Corporation is: |
| True Fishing Adventures, Inc. Address: 9506 So. RED ROAD - M: AM; FEDE: DA 33156 |
| Address 9506 Se REA ROAD - MIAMI FEORIDA |
| - · · · · · · · · · · · · · · · · · · · |
| ARTICLE II - DURATION |
| This Corporation shall exist perpetually unless dissolved according to Florida Law. |
| ARTICLE III - PURPOSE |
| The Corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida. |
| ARTICLE IV - CAPITAL STOCK |
| The Corporation is authorized to issue (50) Shares of Dollar(s) (\$) par value Common Stock, which shall be designated "Common Shares". |
| Prepared By: Dove LAS W. OFSTERIE |

9566 So. RED ROAD Misself Francos 33156 H00000001882

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ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT

The name and street address of the Initial Registered Agent of this Corporation is:

| Name: Don Las W. Address: 9506 So City: Miam: | OF STERLE RED ROAD State: FLOR!DA | Zip: 33/56 |
|--|--|---|
| ARTICLE VI - INITIAL BOAR | D OF DIRECTORS | , |
| This Corporation shall have number of directors may be element by the By-Laws, but shall never addresses of the initial directors. | either increased or dim ver be less than one (1 | ninished from time to time 1). The names and |
| Name: Dovelas W. | OESTERLE | |
| Address: / 950 6 | So. RED State: FEORIDA | <i>ΓοΑ</i> Δ Zip: 33156 |
| Name: | | |
| Address:St | ate | Zip |
| | | <u></u> |
| , | . , | |
| IN WITNESS WHEREOF, the these Articles of Incorporation | | |
| ٠. | Douglance | . Octube (Seal) |
| | | (Seal) |

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TO ACKNOWLEDGE REGISTERED AGENT

Certificate of Registered Agent

of:

Adventures,

Pursuant to Florida Statutes, Section 48.091 and 607.034, the following is submitted: The above Corporation, desiring to organize under the laws of the State of Florida with its registered office as indicated in the Articles of Incorporation

| at: 9506 So. RED ROAD | |
|--------------------------------|---|
| MiAM: FLORIDA 33156 | |
| has named: DoughAs W. OESTERCE | |
| | 8 |

located at the aforesaid address, as its Registered Agent to accept service of process within this state.

ACKNOWLEDGEMENT

Having been named to accept service of process for the above stated Corporation at this place desinated in this certificate I hereby accept to act in this capacity, and agree to comply with the provisisons of Florida Law in keeping open said office.

Registered Agen

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