POOOOOI 49

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

DATE \$ 2.2.00

DOC. EXAM _

000003114890--1 -01/28/00--01086--003 ******78.75 ******78.75

SUBJECT: Savos Ticket (Proposed corp	Orp. Porate name - must include su	ffix)	
Enclosed is an original and one(1) copy of the article	les of incorporation and a	check for :	
□ \$70.00 \$78.75 Filing Fee & Certificate of Status	□\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of	
FROM: MIChele	ADDITIONAL CO	Status PY REQUIRED	
7700 SW	Printed or typed) 7 th Place Address		7
N. Lauderdal City,	FJ 3300 State & Zip	08	SECRETARY OF SALLAHASSEE, FI
954-720 Daytime T	- 0 489 Telephone number		PN 12: 54 OF STATE FLORIDA
Michele S. GAVE AUTHORIZATION BY PHONE TO	H-3426		**

NOTE: Please provide the original and one copy of the articles.

10-2960

A. Howell FEB 2

2000

ARTICLES OF INCORPORATION	FILED
The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.	2000 JAN 28 PM 12: 54 SECRETARY OF STATE TALLAHASSEE, FLORIDA
ARTICLE I NAME The name of the corporation shall be:	
Saras Ticket Corp.	1
ARTICLE II PRINCIPAL OFFICE The principal place of business and mailing address of this corporation shall be:	·.
7700 Sw 7th Place N. Lauderdal	e F1 33068
ARTICLE III SHARES The number of shares of stock that this corporation is authorized to have outstanding	g at any one time is:
ARTICLE IV INITIAL REGISTERED AGENT AND STREET ALL. The name and Florida street address of the initial registered agent are: Saras	ODRESS
n. Lauderdalt, 71 33068 ARTICLE V INCORPORATOR	
The <u>name and address</u> of the incorporator to these Articles of Incorporation are:	
Michele Saras 7700 Sw 7th Place N.Lauderdale, II 33068	

(An additional article must be added if an effective date is requested.)

Having been named as registered agent and to accept service of proces	ess for the above stated corporation at the place designated in this
certificate, I hereby accept the appointment as registered agent and a	
provisions of all statutes relating to the proper and complete perfe	ormance of my duties, and I am familiar with and accept the
obligations of my position as registered agent	
obligations of mexposition as registered agent	1/25/00
Signature/Registered Agent	Date