HUBCO INCORPORATIONS

PAGE 01 Page 1 of 2

Division of Corporations



Florida Department of State

Division of Corporations Public Access System Katherine Harris, Secretary of State

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To:

Division of Corporations

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From:

Account Name

: HUBCO

Account Number : 104662003400

Phone

: (516)935-3940

Fax Number

: (516)935-3088

FLORIDA PROFIT CORPORATION OR P.A.

Moonlight Travel, Inc.

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\$78.75

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ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

Moonlight Travel, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

Moonlight Travel, Inc.

6580 SPRING BOTTOM WAY - #217 BOCA RATON, FL 33433

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

1500 SHARES AT NO PAR VALUE

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

DEE McCANN 6580 SPRING BOTTOM WAY - #217 BOCA RATON, FL 33433

Prepared By: Bruce B. Hubbard 77 East John St. Hicksville, New York 11801 1-516-935-3940

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PAGE 03

H00000009133

ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

LORIROBINETTE 26 HOWLAND TERRACE - #2 WORCESTER, MA 01602

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

29 day of **Feb.** 20 **00** .

LORI ROBINETTE

Signature

PAGE Ø4

H00000009133

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN THE DESIGNATING THE REGISTERED OFFICE/AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is:	Moonlight Travel, Inc.		
2. The name and address of the registere	ed agent and office is:	T., c	2
	DEE McCANN	SECI SECI	
	Name	E RET	丑四
	6580 SPRING BOTTOM WAY - #217	ETARY	29
	(P.O. Box or Mail Drop Box NOT Acceptable)	m _O	三 足 口
	BOCA RATON, FL 33433		ج <u>ب</u> ښ
	(City / State / Zip)	ORIDA	25

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, 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 the statutes relating to the proper and complete performance of my duties, and am familiar with and accept the obligations of my position as registered agent.

DEE McCANN
(Signature)

Feb. 29. 2000

(Date)