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TRANSMITTAL LETTER

FILED

00 MAR -1 AM 8: 38

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

SUBJECT: Miami Center Travel Inc.

(Proposed corporate name - must include suffix)

000003153843--9

-03/02/00--01007--004

\*\*\*\*\*87.50 \*\*\*\*\*87.50

Enclosed is an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00  
Filing Fee

☐ \$78.75  
Filing Fee  
& Certificate of Status

☐ \$78.75  
Filing Fee  
& Certified Copy

☒ \$87.50  
Filing Fee,  
Certified Copy  
& Certificate of  
Status

ADDITIONAL COPY REQUIRED

FROM: Miami Center Travel Inc  
Name (Printed or typed)

201 South Biscayne Blvd, Suite 108  
Address

Miami FLA 33131  
City, State & Zip

305- 577- 3700  
Daytime Telephone number

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

Ret 3/8/2000

**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

Miami Center Travel INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

201 South Biscayne Blvd, Suite 108  
Miami FLA 33131ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Travel, Tours, &amp; Cruises

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS/DIRECTORSThe name(s) and address(es):  
1. AHMED Kaban  
2. NASREEN Kaban  
3. Phil P ShenkmanARTICLE VI REGISTERED AGENT

The name and Florida street address registered agent are:

Ahmed Kaban 201 South Biscayne Blvd Suite 108  
Miami FLA 33131ARTICLE VII INCORPORATOR

The name and address of the Incorporator are:

Ahmed Kaban  
201 South Biscayne Blvd. Suite 108  
Miami FLA 33131

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 statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Ahmed Kaban  
Signature/Registered AgentAhmed Kaban  
Signature/Incorporator2/29/00

Date

2/29/00

Date

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