PODOSO41973

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

SUBJECT: S	Proposed corpora	Travel Co	nsultants,	In
	al and one(1) copy of the articles	_	00003245 -05/10/000 *****78.75 theck for :	615- 1062-00 *****
□ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	□\$122.50 Filing Fee & Certified Copy	\$131.25 Filing Fee, Certified Copy & Certificate	
FROM:	Jeff Ord Name (Pr	ADDITIONAL CO	SEC TALL	00
	3650 Coral Ry Coral Springs	dgel)v. #10 Address FL 330 State & Zip	SSEE, FLORIUS	TICO
	(954) 755- Daytime T	3/14 elephone number		- ·

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*	20 mg / 1
ARTICLES OF INCORPORATION	THE TO SO
The undersigned incorporator, for the purpose of forming a corporation and the Business Corporation Act, hereby adopts the following Articles of It	ncorporation.
ARTICLE I NAME The name of the corporation shall be:	rican Travel Consultants, Inc
ARTICLE II PRINCIPAL OFFICE	· · · · · ·
The principal place of business and mailing address of this co	rporation shall be:
1051 Silver Bell St.	
ARTICLE III SHARES	19
ARTICLE III SHARES The number of shares of stock that this corporation is authorized.	zed to have outstanding at any one time is:
100,000	
ARTICLE IV INITIAL REGISTERED AGENT	AND STREET ADDRESS
The name and Florida street address of the initial registered a	gent are:
X Craig Caplan 1051 Sil	ver Bell Street
Hollywo	od, FL 33019
ARTICLE V INCORPORATOR The name and address of the incorporator to these Articles	,
The manie and address of the anti-point of the first of the anti-point of the anti-p	1. N. 4103
Jeff Ord 3650 Coral Ri	age 151 A 100
Coral Dprings	JFL 33065
	stelon
Signature/Incorporator	Date
A SI MODELLING TO THE COLUMN T	

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

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

Signature/Registered Agent

Date