

P000000277263

This portion can be removed for recipient's records.

Date 7/26/00

FedEx Tracking Number

821970151770

Sender's name

Phone

776 205966

Company BBSN INC

Address 16921 NE 6TH AVE STE 3

Dept./Floor/Suite/Room

City NORTH MIAMI BEACH

State FL

Zip 33162

For Internal Billing Reference

400003342234--2

-08/01/00-01068-003

*****78.75 *****78.75

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. _____
(Corporation Name) (Document #)

2. _____
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

ALL INFORMATION CONTAINED
HEREIN IS UNCLASSIFIED
DATE 08/15/00 BY 6032
TAL/MS/EE/FLORIDA

00 AUG 15 AM 8:08

FILED

- ☐ Walk in ☐ Pick up time _____ ☐ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS

- ☐ Profit
☐ Not for Profit
☐ Limited Liability
☐ Domestication
☐ Other

OTHER FILINGS

- ☐ Annual Report
☐ Fictitious Name

AMENDMENTS

- ☐ Amendment
☐ Resignation of R.A., Officer/Director
☐ Change of Registered Agent
☐ Dissolution/Withdrawal
☐ Merger

REGISTRATION/QUALIFICATION

- ☐ Foreign
☐ Limited Partnership
☐ Reinstatement
☐ Trademark
☐ Other

T. Burch AUG 1 6 2000

Examiner's Initials



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

August 4, 2000

BBSN INC
16921 NE 6TH AVE STE 3
NORTH MIAMI BEACH, FL 33162

SUBJECT: EVETOURS INC
Ref. Number: W00000019419

We have received your document for EVETOURS INC and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

A corporation may not act as its own incorporator. Please designate an individual, another active domestic or foreign corporation, with a street address.

The document is illegible and not acceptable for imaging. We ask that you type or carefully print the information in the appropriate blocks.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6928.

Tim Burch
Document Specialist

Letter Number: 800A00042378

ARTICLES OF INCORPORATION

OF
EVE TOURS . INC

FILED
00 AUG 15 AM 8:08
CLERK OF THE
COURT
TALLAHASSEE, FLORIDA

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

ARTICLES I NAME

The name of the corporation shall be: EVE TOURS INC

The principal place of business of this corporation shall be:

16352. N.E 12 AV
N.M.B FL 33162

ARTICLE II NATURE OF BUSINESS

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, country, territory or nation.

ARTICLE III CAPITAL STOCK

The aggregate number of shares of stock and its par value that this corporation is authorized to have outstanding at any one time is:

100 X \$1.00

ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

EVE TOURS INC
16352 N.E 12. AV
N.M.B.
FL 33162

ARTICLE V OFFICERS DIRECTORS

The name(s) and street address(es) of the initial officer(s) and director(s), if any, who shall hold office the first year of the corporation's existence or until their successor(s) is(are) elected, is(are):

HAVA - WASSERMAN
PRESIDENT
16352 N.E. 12 AVE
N H B
FL 33162

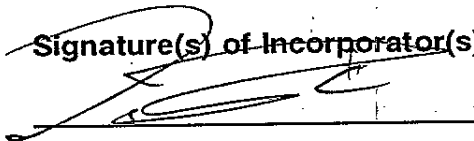
ARTICLE VI INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to this articles of incorporation is(are):

HAVA WASSERMAN
16352 N.E. 12 AVE
N H B FL
33162

IN WITNESS WHEREOF, the undersigned incorporator(s) has(have) executed these Articles of Incorporation this _____ day of 08/08, 1900.

Signature(s) of Incorporator(s)



STATE OF _____
COUNTY OF DANE

THE FOREGOING instrument was acknowledged and sworn to before me this _____ day of _____, 19____
by _____ of _____
(Name of Incorporator) (Name of Corporation)

Notary Public

My Commission Expires: _____

(SEAL)
ARTICLES OF INCORPORATION FILING FEE.

CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

1. The name of the corporation is: EVERETT'S INC

2. The name and address of the registered agent and office is:

SAM. AYNER
(NAME)

16252 H E 12 AV
(P.O. BOX NOT ACCEPTABLE)

H H B FL 33162
(CITY/STATE/ZIP)

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

DATE

REGISTERED AGENT FILING FEE: \$35.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

00 AUG 15 AM 8:08

FILED