

P00000103378

Requester's Name

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Phone #

954) 945-1433

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Office Use Only

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

1. S.O.S FLORIDA USA TRAVEL INFO CARD INC.

(Corporation Name)

(Document #)

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*****78.00 *****78.00

2. _____
(Corporation Name)

(Document #)

3. _____
(Corporation Name)

(Document #)

4. _____
(Corporation Name)

(Document #)

☐ 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

AMENDMENTS

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

OTHER FILINGS

- ☐ Annual Report
☐ Fictitious Name

REGISTRATION/QUALIFICATION

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

AUTHORIZATION BY PHONE TO

CORRECTIVE Flavio Vacca to be R.A.

DATE

11/3/00

Examiner's Initials



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

September 18, 2000

ROBERT HALL
3800 W BROWARD BLVD
PLANTATION, FL 33312

SUBJECT: S.O.S FLORIDA USA TRAVEL INFO CARD INC.
Ref. Number: W00000022728

We have received your document for S.O.S FLORIDA USA TRAVEL INFO CARD INC. and your check(s) totaling \$78.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

According to section 607.0202(1)(b) or 617.0202(1)(b), Florida Statutes, you must list the corporation's principal office, and if different, a mailing address in the document. If the principal address and the registered office address are the same, please indicate so in your document.

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with a telephone number where you can be reached during working hours.

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) 487-6915.

Pamela Hall
Document Specialist

Letter Number: 200A00049065

CERTIFICATE OF INCORPORATION

OF

S.O.S Florida USA Travel Info Card Inc.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, the undersigned, in order to form a corporation from the purposes hereafter stated, under the pursuant to the provisions of the General Corporation Law of the State of Florida, do hereby certify as follows:

FIRST: The name of the corporation is:

S.O.S Florida USA Travel Info Card Inc.

SECOND: The registered office of the corporation and place of business is in the State of Florida is to be location at: 3901 N 66 Ave of Hollywood, in the County of Broward.

The name of the registered agent at that address is Flavio G Vacca 3901 N 66 Ave, Hollywood, Florida 33024.

THIRD: The nature of the business, and the objects and purposes proposed to be transacted, promoted and carried on, are to do any and all things therein mentioned, as fully and to the same extent as natural persons might of could do, and in any part of the world, viz

To do any lawful act or thing for which
Corporation may be organized under the
General Corporation Law of the State of
Florida.

FOURTH: The total number of shares which the corporation is authorized to issue is 1000 shares no par value.

FIFTH: The name and address of the incorporator is as follows:

Name
Robert Hall

Address
3800 W Broward Blvd
Plantation, Florida 33312

SIXTH: The power of the incorporator are to terminate upon filing of the Certificate of Incorporation, and the name(s) and mailing address(es) of the person(s) who is (are) to serve as Director(s) until the first annual meeting of stockholders or until their successors are elected and qualify is (are) as follows:

<u>Name</u>	<u>Address</u>
Flavio G Vacca	3901 N 66 Ave Hollywood, FL 33024

SEVENTH: The Directors shall have power to make and to alter or amend the by-laws; to fix the amount to be reserved as working capital and to authorize and cause to be executed, mortgages and liens without limit as to the amount, upon the property and franchises of this Corporation.

With the consent in writing, and pursuant to a vote of the holders of a majority of the capital stock issued and outstanding, the Directors shall have authority to dispose, in any manner, of the whole property of the Corporation.

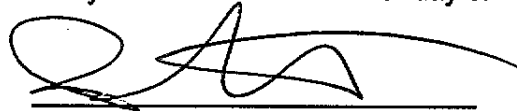
The by-laws shall determine whether and to what extent the accounts and books of this Corporation, or any of them, stockholder shall have any right of inspecting any account, or book, or document of this Corporation except as conferred by Law of the by-laws, or by resolution of the stockholders.

The stockholders and directors shall have power to hold their meeting and keep the books, documents and papers of the corporation outside the State of Florida, at such places as may be from time to time designated by the by-laws or by the resolution of the stockholders or directors, except as otherwise required by the laws of the State of Florida.

It is the intention that the objects, purpose and powers specified in the third paragraph hereof shall, except when otherwise specified in said paragraph, be in nowise limited or restricted by reference to or inference from the term of any other clause or paragraph in this Certificate of Incorporation, but that the objects, purpose and powers specified in the third paragraph and in each of the clauses or paragraphs of this charter shall be regarded as independent objects, purpose, and power.

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 12th day of September, 2000.

Robert Hall
Incorporator



CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISION OF SECTION 607.0501 OR 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: S.O.S Florida USA Travel Info Card Inc.
2. The name and address of the registered agent and the office is:

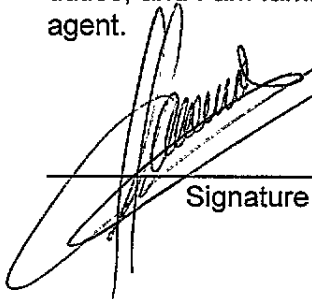
Flavio G Vacca

3901 N 66 Ave

Hollywood, FL 33024

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Having been named as registered agent and to accept service or process for the above stated corporation at the place designated in this certificate. 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 obligation of my position as registered agent.



Signature

9.12.00

Date