P00000109943

TRANSMITTAL LETTER

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

SUBJECT: BLUE WATERS FISHING CHARTERS, INC.

(Proposed corporate name - must include suffix)

Enclosed is an original and (1) one copy of the Articles of Incorporation and a check for \$78.75

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| FROM: | GELBER AND COMPANY | *****(8.(5) *****(8.(5) |
|-------|--|---|
| | Name | |
| | 285 N.W. 199 TH Street, Suite 204 | |
| | | 00 SE TAL |
| | Address | 1 1 <u>.2.</u> 1 |
| | Miami, FL 33169 | FILED NOV 27 AM 9: I CRETARY OF STATE LAHASSEE, FLORIDA |
| | City, State & Zip | L G M |
| | (305) 651-8000 | |
| | Daytime Telephone number | |

John Contraction of the Contract

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

BLUE WATERS FISHING CHARTERS, INC.

ARTICLE II PRINCIPAL OFFICE

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

7030 SW 82ND AVENUE MIAMI, FL 33143

ARTICLE III SHARES

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

100

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

REECE JOHNSON 7030 SW 82ND AVENUE MIAMI, FL 33143

<u>ARTICLE V INCORPORATOR</u>

The name and address of the incorporator to these Articles of Incorporation are:

REECE JOHNSON 7030 SW 82ND AVENUE MIAMI, FL 33143

ARTICLE VI EFFECTIVE DATE

The effective date of this corporation shall be: NOVEMBER 20, 2000

| Keece Th- | 11/20/00 |
|------------------------|----------|
| Signature/incorporator | Date |

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

OFFICIAL NOTARY SEAL KELLY C WATSON NOTARY PUBLIC STATE OF FLORIDA COMMESSION NO. CC696843 MY COMMISSION EXP. NOV. 17,2001 IN WITNESS WHEREOF,

I have signed by name and affixed
my official notary seal this
dayof Notary Public