**Division of Corporations** 



## Florida Department of State

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To:

Division of Corporations

Fax Number : (850)205-0381

From:

Account Name : FAS-T CORP. AGENTS, INC.

Account Number: 071001002335 Phone : (305)599-0839

Fax Number : (305)716-0346

## FLORIDA PROFIT CORPORATION OR P.A.

SUPER CUBA TRAVEL, INC.

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Certificate of Status	Ű
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

1 of 2

8/14/02 10:28 AM

## ARTICLES OF INCORPORATION

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

### ARTICLE I NAME

The name of the corporation shall be: SUPER CUBA TRAVEL, INC.

ARTICLE II PRINCIPAL OFFICE

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

4905 SW 8 TH STREET MIAMLFL, 33134.

#### ARTICLE III SHARES

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

This corporation is authorized to issue 100 shares of \$ 1.00 per value common stock which shall be designated of 100 % to President.

ARTICLE IV INTITAL REGISTERED AGENT AND STREET ADDRESS.

The name and address of the initial registered agent is:

ALINA FRAGUELA 4905 SW 8 TH STREET MIAMI, FL, 33134.

#### ARTICLE V INCORPORATOR (S)

The name(s) and Street address (s) of the incorporator (s) to these Articles of Incorporation is (are):

ALINA FRAGUELA 4905 SW 8 TH STREET MIAMI, FL, 33134.

#### ARTICLE VI DIRECTOR (S)

The name and Street address (es) of the director (s) to these Articles of Incorporation is (are ):

ALINA FRAGUELA 4905 SW 8 TH STREET MIAMI. FL, 33134.

The undersigned incorporator (so has (have) executed these Articles of Incorporation this 10 days of August of 2002.

Signature

Signature

Articles of Incorporation Filing Fee -\$ 35.00

# CERTIFICATE OF DESIGNATION REGISTERED AGENT/ REGISTERED OFFICE.

...Pursuant to the provisions of sections 60 or , Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registere office/registered agent, in the State of Florida.

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

1. The name of the corporation is:

	SUPER CUBA TRAVEL, INC.	
	( NAME )	
<u> </u>	4905 SW 8 TH STREET	•
	MIAMI , FL ,33134	:
	(ADDRESS)	
	(P. O BOX NOT ACCEPTABLE)	

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 AFPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. IFURTHER 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** 

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