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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

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DIVISION OF CORPORATIONS  
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**FLORIDA PROFIT CORPORATION OR P.A.**

**SIMBA SAFARIS EAST AFRICA INC.**

|                       |         |
|-----------------------|---------|
| Certificate of Status | 0       |
| Certified Copy        | 1       |
| Page Count            | 04      |
| Estimated Charge      | \$78.75 |

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**ARTICLES OF INCORPORATION  
OF**

**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.**

**ARTICLE 1-NAME**

**The name of the corporation shall be: Simba Safaris East Africa Inc.**

**The principal place of business of this corporation shall be 2989 West State Road 434, Suite 300, Longwood, Florida 32779.**

**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, county, territory or nation.**

**ARTICLE III-CAPITAL STOCK**

**The aggregate number of shares of stock and its value that this corporation is authorized to have outstanding at any one time: 100 Shares \$1 Par Value**

**ARTICLE IV-TERM OF EXISTENCE**

**This corporation is to exist perpetually.**

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## **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):**

***Roger Fielding, President  
2989 West State Road 434, Suite 300  
Longwood, Florida 32779***

***Shamira Fielding, Vice President  
2989 West State Road 434, Suite 300  
Longwood, Florida 32779***

## **ARTICLE VI-INCORPORATORS**

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

**Robert J. Flowers  
400 Flamingo Ave  
Stuart, FI 34996**

**IN WITNESS WHEREOF, the undersigned incorporator(s)  
has (have) executed these ARTICLES OF  
INCORPORATION this 3<sup>rd</sup> day of March, 2004.**

**SIGNATURE(S)**

  
**Robert J. Flowers**

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**CERTIFICATE OF DESIGNATION  
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of Section 607.325 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: **Simba Safaris East Africa Inc.**
2. The name and address of the registered agent and office is: **Roger W. Fielding  
2989 West State Road 434, Suite 300  
Longwood, Florida 32779**

SIGNATURE *R. Fielding*  
TITLE President  
DATE March 3/2004

Having been named to accept service of process for the above stated corporation, at the place designated in this certificate, I further agree to act in this capacity, and I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I accept the duties and obligations of Section 607.325, Florida Statutes.

SIGNATURE *R. Fielding*  
DATE March 3/2004

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