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(Re	equestor's Name)			
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PICK-UP	☐ WAIT	MAIL		
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Certified Copies	_ Certificate	s of Status		
Special Instructions to Filing Officer:				
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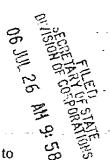
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### **COVER LETTER**

TO: Registration Division of C			
SUBJECT: PA		UISE AND IR	
	cate of Conversion, Ar	ticles of Incorporation	, and fees are submitted to tion" in accordance with s
Please return all corn	respondence concernin	g this matter to:	
DEBR	A MACE (Contact Person)	=DONIO_	. •
	(Firm/Company)		06 J
1235	FALLVIEW W	)AY	06 JUL 26 RM
WELL	NGTON For City, State and Zip Code)	33414	
	ion concerning this ma		
VACQUELIN (Name of Co	E PACERMO CA	Ant (Q54) 44 (Area Code and Da	ytime Telephone Number)
Enclosed is a check	for the following amou	ınt:	
\$105.00 Filing Fees	\$113.75 Filing Fees and Certificate of Status	\$113.75 Filing Fees and Certified Copy	\$122.50 Filing Fees, Certified Copy, and Certificate of Status
STREET ADDRES	SS:	MAILING A	ADDRESS:
Registration Section Division of Corpora Clifton Building 2661 Executive Cen Tallahassee, FL 32	tions ter Circle	Registration Division of OP. O. Box 63 Tallahassee,	Corporations 327

## Certificate of Conversion For "Other Business Entity" Into Florida Profit Corporation



This Certificate of Conversion <u>and attached Articles of Incorporation</u> are submitted to convert the following "Other Business Entity" into a Florida Profit Corporation in accordance with s. 607.1115, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Conversion is:				
PARADISE CRUSE and TRAVEL LLC #1,06000058638 (Enter Name of Other Business Entity)				
2. The "Other Business Entity" is a LLC  (Enter entity type. Example: limited liability company, limited partnership, sole proprietorship, general partnership, common law or business trust, etc.)				
first organized, formed or incorporated under the laws of FIORIDA (Enter state, or if a non-U.S. entity, the name of the country)				
on 6-06 (Enter date "Other Business Entity" was first organized, formed or incorporated)				
3. If the jurisdiction of the "Other Business Entity" was changed, the state or country under the laws of which it is now organized, formed or incorporated:				
4. The name of the Florida Profit Corporation as set forth in the attached Articles of				
PARADISE CRUISE AND TRAVEL, INC.				
(Enter Name of Florida Profit Corporation)				

5. If not effective on the date of filing, enter the effective date:  (The effective date: 1) cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State; AND 2) must be the same as the effective date listed in the attached Articles of Incorporation, if an effective date is listed therein.)				
Signed this 21 day of July , 20 06.				
Signature: Dibna M Macedonio  (Must be signed by a Chairman, Vice Chairman, Director, Officer, or, if Directors or Officers have not been selected, an Incorporator.)				
Printed Name: Deben M. Macadonioritle: President				

### Fees:

Certificate of Conversion:

\$35.00

Fees for Florida Articles of Incorporation:

\$70.00

Certified Copy: Certificate of Status:

\$8.75 (Optional) \$8.75 (Optional)

#### ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

#### ARTICLE I NAME

The name of the corporation shall be:

PARADISE CRUISE AND TRAVEL, INC.

#### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

1235 FALLVIEW WAY WELLINGTON, FL 33414

#### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY & ALL LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is:

100

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

P- DEBRA M. MACEDONIO 1235 FALLVIEW WAY, WELLINGTON FZ 33414

VP- RICHARD J. PRINZO 1235 FALLVIEWWAY, WELLINGTON, FL 33414

VP- STEPHEN L. MACEDONIO 1235 FALLVIEW WAY, WELLINGTON, FL 33414

#### ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

DEBRA M. MACEDONIO 1835 FALLVIEW WAY WELLINGTON, FL 33414

DEBRA III. IIIACEDONIO	•
1335 FALLVIEW WAY	
WELLINGTON, FL 33414	
****************	*********
Having been named as registered agent to accept service of process for the designated in this certificate, I am familiar with and accept the appointment as capacity	
Debra M Macedonio	7-21-06
Signature/Registered Agent	- Date
Depra M Mocedonio	7-21-06
Signature/Incorporator	Date

ARTICLE VII INCORPORATOR
The name and address of the Incorporator is:

OIVISION OF CORPORATIONS