Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : CSH SERVICES, LLC

Account Number : I20070000160 : (800)494-3124 Phone

Fax Number

: (561)455-9885

FLORIDA PROFIT/NON PROFIT CORPORATION

MUNTRIPS, INC

Certificate of Status	. 0
Certified Copy	0
Page Count	02
Estimated Charge	\$70.00

Electronic Filing Menu

Corporate Filing Menu

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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:

MUNTRIPS, INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

5148 SW 183 AVENUE

MIRAMAR, FLORIDA 33029

ARTICLE III PURPOSE

The purpose for which the corporation is organized is to engage in any activity or business permitted under the laws of the State of Florida.

ARTICLE IV SHARES

The number of shares of stock is:

1,500 COMMON SHARES PAR VALUE \$0,01

ARTICLE V INITIAL OFFICERS / DIRECTORS (optional)

The name(s), address(es), and title(s) of the directors and officers is:

DIRECTOR

ALBERTO DARSA

5148 SW 183 AVENUE

MIRAMAR, FLORIDA 33029

DIRECTOR

ALEJANDRO MUNOZ

10900 SW 104TH STREET, #128

MIAMI, FLORIDA 33176

DIRECTOR

ADALIS DARSA

5148 SW 183 AVENUE

MIRAMAR, FLORIDA 33029

DIRECTOR

JOCELYN MUNOZ

10900 SW 104TH STREET, #128

MIAMI, FLORIDA 33176

#08000,1554478.3

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ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

ALBERTO DARSA 5148 SW 183 AVENUE MIRAMAR, FLORIDA 33029

ARTICLE VII INCORPORATOR

The name and Florida street address of the incorporator is:

ALBERTO DARSA 5148 SW 183 AVENUE MIRAMAR, FLORIDA 33029

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.

ALBERTO DARSA Registered Agent

ALBERTO DARS# /Incorporator

6/18/08

Date