# Florida Department of State

Division of Corporations Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H09000045272 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : CSH SERVICES, LLC

Account Number: I20070000160 : (800)494-3124

Fax Number : (561)455-9885

## FLORIDA PROFIT/NON PROFIT CORPORATION

MV Cruise Line Fulfillment, Inc.

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

Electronic Filing Menu

Corporate Filing Menu

H090000452723

### **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:

MV CRUISE LINE FULFILLMENT, INC.

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

377 COUNTY RD 309 SATSUMA, FLORIDA 32189

#### 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: 100 COMMON SHARES PAR VALUE \$0.01

#### ARTICLE V INITIAL OFFICERS / DIRECTORS (options())

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

PRESIDENT THOMAS ARRIGONI 377 COUNTY RD 309 SATSUMA, FLORIDA 32189



H090000452723

PAGE 2 MV CRUISE LINE FULFILLMENT, INC.

ADTTC	E 1/T	REGISTERED	A PRINTER
WATTOL	E YA	<b>ドロロイン ! これにい</b>	AGENI

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

THOMAS ARRIGONI 181 LAKE ST POMONA PARK, FLORIDA 32181

ARTICLE VII INCORPORATOR

The name and Florida street address of the incorporator is:

THOMAS ARRIGONI **377 COUNTY RD 309** SATSUMA, FLORIDA 32189

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.

OMAS ARRIGONI / Registered Agent

á-25-09