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LAZARUS

PAGE 01/03

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Florida Department of State
Division of Corporations
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TALLAHASSEE, FLORIDA

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION
ORQUIDEA TRAVEL, INC.

Certificate of Status 0
Certified Copy 1
Page Count 03
Estimated Charge \$78.75

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DIVISION OF CORPORATIONS

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ARTICLES OF INCORPORATION

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

ARTICLE I - NAME

The name of the corporation shall be:

Orquidea Travel, Inc.

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TALLAHASSEE, FLORIDA

ARTICLE II - PRINCIPAL OFFICE

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

*8777 NW 139 Terrace
Miami Lakes Fl.
33018*

ARTICLE III - SHARES

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

100

ARTICLES IV - INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

*Solig Marina Valiente
8777 NW 139 Terrace
Miami Lakes Fl.
33018*

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ARTICLE V - INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation is:

Julia Marina Valiente
8777 NW 139 Terrace
Miami Lakes Fl. 33018

The undersigned incorporator has executed these Articles of Incorporation this

_____ day of _____ 20_____

[Handwritten Signature]
Signature

ARTICLE VI - DIRECTOR(S)

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

Julia Marina Valiente
Presidente.

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CERTIFICATE OF DESIGNATION OF REGISTERED AGENT

/REGISTERED OFFICE

Having been named as Registered Agent and to accept service of process for the above stated corporation at place designated in this certificate, I hereby accept the appointment as Registered Agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes related to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as Registered Agent.

[Handwritten Signature]
Registered Agent Signature

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