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* COVER LETTER

Department of State New Filing Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

SUBJECT: Royal Leisure Group, Co.						
(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)						
Enclosed are an original and one (1) copy of the articles of incorporation and a check for:	\neg					
\$70.00 \$78.75 Filing Fee & Certificate of Status & Certificate of Status & Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED	of					
FROM: Cesar M. Garcia Name (Printed or typed)		• مس				
1825 Ponce de Leon Blvd. # 135						
Address	1 FEB 16					
Coral Gables, FL 33134						
City, State & Zip 305-799-3887	န မှ	PCRAT				
Daytime Telephone number	16					
cgarcia218@msn.com E-mail address: (to be used for future annual report notification)						

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

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

ARTICLE I I	———————————————————————————————————————	0.	SEGNETARY OF SHALL DIVISION OF CORPURATION
ARTICLE II	PRINCIPAL OFFICE		0011FF0 16 PM 3: 16
18	Principal <u>street</u> address 325 Ponce de Leon Blvd. # 135 oral Gables, FL 33134		Mailing address, if different is:
ARTICLE III P The purpose for whi to engage in a	cURPOSE ich the corporation is organized is: ctivity or business permitted under the	ne laws of the	e State of Florida.
The number of share	SHARES s of stock is:1,500 COMMON SHARES I		\$0.01
	initial officers and/or directors c:Cesar M. Garcia, President & Treasurer 1825 Ponce de Leon Blvd. # 135 Coral Gables, FL 33134	Name and Title Address:	:Pedro Jaimot, Vice-President, Director & Secretary 1825 Ponce de Leon Blvd. # 135 Coral Gables, FL 33134
Name and Titl Address:	e:	Name and Title Address:	
Name and Titl Address:	e:	Name and Title Address:	
4 D. M. C. I. B. L. T		-	
	REGISTERED AGENT ida street address (P.O. Box NOT acceptable) of	the registered age	ent is:
Name: Address:	Pedro Jaimot 1825 Ponce de Leon Blvd. # 135 Coral Gables, FL 33134	•	
ARTICLE VII 1	INCORPORATOR		
The <u>name and addr</u> Name: Address:	ess of the Incorporator is: Cesar M. Garcia 1825 Ponce de Leon Blvd. # 135 Coral Gables, FL 33134		
	I as registered agent to accept service of process familiar with and accept the appointment as regi		
_(+00t	Required Signature/Registered Agent		2/14/11 Date
	nent and affirm that the facts stated herein are Sartment of State constitutes a third degree felony		
	Required Signature/Incorporator		2/14/11 Date