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May 15, 2013

FLORIDA FILING & SEARCH SERVICES INC

SUBJECT: TOPSIDE YACHTING LTD

Ref. Number: W13000028363

We have received your document for TOPSIDE YACHTING LTD and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

The use of the abbreviation "Ltd." does not clearly indicate that this is a corporation instead of a partnership. Therefore, please remove the abbreviation "Ltd." from the corporate name."

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Justin M Shivers Regulatory Specialist II New Filing Section

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FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662 TALLAHASSEE, FL 32302 155 Office Plaza Dr Ste A Tallahassee FL 32301 PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE:

5/14/13

NAME:

TOPSIDE YACHTING LTD

TYPE OF FILING: ARTICLES

COST:

78.75

RETURN: CERTIFIED COPY PLEASE

ACCOUNT: FCA000000015

AUTHORIZATION: ABBIE/PAUL HODGE

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

	Principal street address On Avenue, Ste 5002	Mailing address, if di	fferent is:
	New York 10174		
RTICLE DI P	URPOSE ch the corporation is organized is: Acquisit	ion of a yacht.	
	······································		
RTICLE V I	SHARES s of succk is: INITIAL OFFICERS AND/OR DIRECTORS John P. Zampino, Director/President		TALE DE ASSERTE
	INITIAL OFFICERS AND/OR DIRECTORS Title: John P. Zampino, Director/President		GIEK IS, SESSE OF TRUE
Name and	Title: John P. Zampino, Director/President 405 Lexington Ave. Ste 5002	Name and Title:	VOING to ASSESS TO BE
Name and Address	Appl. Zampino, Director/Sacretary	Name and Title:	<u>新</u>
RTICLE V I	Appl. Zampino, Director/Sacretary	Name and Title: Address: Name and Title:	<u> </u>
Name and T	INITIAL OFFICERS AND/OR DIRECTORS Title: John P. Zampino, Director/President 405 Lexington Ave. Ste 5002 New York, NY 10174 Title: Ana L. Zampino, Director/Secretary	Name and Title:	High Control
Name and T	Ana L. Zampino, Director/Secretary 405 Lexington Ave. Ste 5002 New York, NY 10174	Name and Title: Address: Name and Title:	High Control
Name and Address Name and Address Name and Address	Ana L. Zampino, Director/Secretary 405 Lexington Ave. Ste 5002 New York, NY 10174 405 Lexington Ave. Ste 5002 Ste 5002 Ana L. Zampino, Director/Secretary 405 Lexington Ave. Ste 5002	Name and Title: Address: Name and Title: Address:	

Name and Title:		Name and Title:	
Addres	Addr	:38;	
ARTICLE VI The name and J	REGISTERED AGENT Torida street address (P.O. Box NOT acceptable) of the reg	gistered agent is:	
Name:	NRAI Services, Inc.		
Address:	1200 South Pine Island Road		
	Plantation, FL 33324	<u></u> كما ريان	
ARTICLE VII	INCORPORATOR address of the Incorporator is:		
Name:	Ana L. Zampino		
Address:	405 Lexington Ave, Ste 5002	8: 2 CONIC	
Temporari.	New York, NY 10174	Sw =	
Having been no this certificate, MMA	uned as registered agent to accept service of process for the am familiar with and accept the appointment as registered Baca — Maria Garcia-Asst. Required Signature/Registered Agent	agent and agree to act in this capacity	
i submit this do	cument and affirm that the facts stated herein are true. I	am aware that the false information submitted in a	
document to the	Department of flate constitutes a third degree felony as pr	ordided for in \$.817.355, F.S 5/14/13	
	Required Signature/Inchripotator	Date	