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To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : FASTKIT CORP Account Number : I20100000009

: (305)599-0839

Fax Number

: (305)592-9591

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

| | Address: | | | |
|-------|----------|--|--|--|
| KMALL | ACCTASS: | | | |

FLORIDA PROFIT/NON PROFIT CORPORATION

Easy Sailing Inc

| المارية والمراوع المراوعة والمراوعة | NAME OF TAXABLE PARTY OF TAXABLE PARTY. |
|---|---|
| Certificate of Status | 0 |
| Certified Copy | 1 |
| Page Count | 02 |
| Estimated Charge | \$78.75 |

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

| ARTICLE I NAM The name of the corporat | Easy Sailing Inc | | | | |
|---|--|---------------------|-----------------------------------|---------------------------------------|--|
| ARTICLE II PRI | VCIPAL OFFICE Principal <u>street</u> address | : | Mailing address, if different is: | | |
| Miami Beach, | | | | | |
| • | | | | | |
| ARTICLE III PURI The purpose for which the | POSE ne corporation is organized is: Charter | s Services | 3 | | |
| | | | | | |
| | | • | | | |
| : | | | 79 | 7 | |
| | | <u> </u> | | 3 71 | |
| | | | 60 : ସେ : ୧୯ : | 24 | |
| ARTICLE IV SHA The number of shares of s | | | C, FLORIBA | | |
| | Bridget L. Fulton- President | 3 Nome and Title | Alejandro M. Kleiman | တ - Treasurer | |
| Address | 407 Lincoln Rd Ste 9A | Address; | 407 Lincoln Rd | | |
| Vadices | Miami Beach,FL 33139 | | Miami Beach, F | 33139 | |
| | | | ė! | | |
| Name and Title: | | Name and Title | ! | | |
| Address | | Address: | | | |
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| Name and Title | · | Name and Title | | | |
| Address | | - | | | |
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| Name and Title: | | Name and Title: | | | |
|--|---|--|--|--|--|
| Address | | Address: | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| ARTICLE VI The pame and F | REGISTERED AGENT forida street address (P.O. Box NOT acceptable) o | of the registered agent is: | | | |
| Name: | Brito & Brito Accounting Inc. | 29 7 | | | |
| Address: | 407 Lincoln Rd Ste 9A | APR | | | |
| | Miami Beach, Fl 33139 | R 24 | | | |
| | | mer in the second of the secon | | | |
| ARTICLE VII | INCORPORATOR | | | | |
| The <u>name and a</u> | diress of the Incorporator is: | | | | |
| Name: | Bridget L. Fulton | | | | |
| Address: | 407 Lincoln Rd Ste 9A | | | | |
| | Miami Beach, Fl 33139 | _ | | | |
| | | | | | |
| Having been nat this certificate, I | ned as registered agent to accept earmee of proces am familiar with and accept the appointment as re | st for the above stated corporation at the place designated . egistered agent and agree to act in this capacity | | | |
| | / III hi | 04.23.2014 | | | |
| • | Required Signature/Registered Agent | Date | | | |
| 1 submit this doc | sument and affirm that the facts styled herein uro | e true. I am aware that the false information submitted in | | | |
| document to the | Department of State constitutes withird degral felor | 04.23.2014 | | | |
| | tequired Signature/Incorporator | Date | | | |