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SECRETARY DE STATE

1/4

COVER LETTER

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

SUBJECT: World	Ship Inc		
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an ori	ginal and one (1) copy of the art	ticles of incorporation an	d a check for:
\$70.00 Filing Fee		\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status
	•	ADDITIONAL CO	OPY REQUIRED
FROM:		e (Printed or typed)	
97:	37 NW 41st Street, Suite 792		· <u> </u>
		Address	
Do	oral, Florida 33178		
	City,	State & Zip	
30:	5-781-9586		
- · ·	Daytime 7	elephone number	
c_c	eballos@oxora.com		
	E-mail address: (to be use	d 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)
16 May

The name of the corpo		го ПАТ -9 PM 1: 19
-	VCIPAL OFFICE Principal street address	SECRETARY OF STATE FALLAHASSEE FLORIDA Mailing address, if different is:
Ooral, Florida 33178	Julie 1772	
		1
RTICLE III PUR.	POSE n the corporation is organized is:	maintenance services to the cruise line and cargo industry,
icluding new project	development, construction, and refurbish	ment.
RTICLE IV SHA he number of shares	<u>RES</u> 1,000 of stock is:	
The number of shares	AL OFFICERS AND/OR DIRECTORS Raffaele A bhate/President	
TRTICLE IV SHA The number of shares IRTICLE V INIT Name and Ti Address	AL OFFICERS AND/OR DIRECTORS Raffaele A bhate/President	Name and Title:
The number of shares IRTICLE V INIT Name and Ti	of stock is: IAL OFFICERS AND/OR DIRECTORS Raffaele Abbate/President	
The number of shares of the nu	IAL OFFICERS AND/OR DIRECTORS Raffaele Abbate/President 9737 NW 41st Street, Suite 792 Doral, Florida 33178 Giuditta T. Abbate/Vice President	Name and Title:
The number of shares of the nu	IAL OFFICERS AND/OR DIRECTORS Raffaele Abbate/President 9737 NW 41st Street, Suite 792 Doral, Florida 33178 le: Giuditta T. Abbate/Vice President 9737 NW 41st Street, Suite 792	Name and Title: Address: Name and Title:
The number of shares of the nu	IAL OFFICERS AND/OR DIRECTORS Raffaele Abbate/President 9737 NW 41st Street, Suite 792 Doral, Florida 33178 le: Giuditta T. Abbate/Vice President 9737 NW 41st Street, Suite 792	Name and Title: Address:
The number of shares of the nu	AL OFFICERS AND/OR DIRECTORS tle: Raffaele Abbate/President 9737 NW 41st Street, Suite 792 Doral, Florida 33178 Giuditta T. Abbate/Vice President 9737 NW 41st Street, Suite 792	Name and Title: Address: Name and Title:
The number of shares of the nu	AL OFFICERS AND/OR DIRECTORS Raffaele Abbate/President 9737 NW 41st Street, Suite 792 Doral, Florida 33178 Giuditta T. Abbate/Vice President 9737 NW 41st Street, Suite 792 Doral, Florida 33178 Carolina Ceballos/Secretary	Name and Title: Address: Name and Title: Address:
The number of shares of the nu	AL OFFICERS AND/OR DIRECTORS Raffaele Abbate/President 9737 NW 41st Street, Suite 792 Doral, Florida 33178 Giuditta T. Abbate/Vice President 9737 NW 41st Street, Suite 792 Doral, Florida 33178 Carolina Ceballos/Secretary	Name and Title: Address: Name and Title:

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Name a	nd Title:	Name and Title:	16 MAY -9 PM 1: 19
Addre		Address:	SECRETARY OF STATE TALLAHASSEE FEORIDA
ADTICL DAY	DECOMPTED ACTIVITY		
	<u>REGISTERED AGENT</u> Florida street address (P.O. Box NOT acceptable)	of the registered agent is:	
Name:	Raffaele Abbate	or the registered agent is.	
Address:	9737 NW 41st Street, Suite 792	_	
	Doral, Florida 33178	_	
ARTICLE VII	<u>INCORPORATOR</u>		
The name and	address of the Incorporator is:		
Name:	Raffaele Abbate		·
Address:	9737 NW 41st Street, Suite 792	_	
	Doral, Florida 33178	·····	
Effective date, i (If an effective days after the	EFFECTIVE DATE: f other than the date of filing: date is listed, the date must be specific and cannfilling.) te inserted in this block does not meet the applicable	ot be more than five bus	siness days prior or 90 business
	effective date on the Department of State's records		ichis, uns date will not be fisted as
Having been no this certificate,	nmed as registered agent to accept service of proce I am familiar with and accept the appointment as re	ss for the above stated co egistered agent and agree	rporation at the place designated in to act in this capacity
~	RAFFAELE AL	RR A 115	5/8/2016
	Required Signature/Registered Agent	77/ Y (G	Date
	ocument and affirm that the facts stated herein are Department of State constitutes a third degree felo		
Sed.	### RAFFA & L & Audired Signature/Incorporator	BB ATTE	5/8/2016 Date