

**P20000034052**

Florida Department of State  
Division of Corporations  
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**FLORIDA PROFIT/NON PROFIT CORPORATION  
ALADINA MARINE DISTRIBUTOR INC**

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

2020 MAY -1 PM 12:23  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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*Second Request*

**ARTICLES OF INCORPORATION**

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

**ARTICLE I NAME**The name of the corporation shall be: ALADINA MARINE DISTRIBUTOR INC.**ARTICLE II PRINCIPAL OFFICE**Principal street address13295 SW 124 ST  
MIAMI, FL 33186

Mailing address, if different is:

13295 SW 124 ST  
MIAMI, FL 33186**ARTICLE III PURPOSE**The purpose for which the corporation is organized is: EVERYTHING RELATED TO  
CRUISE LINESFILED  
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TALLAHASSEE, FLORIDA**ARTICLE IV SHARES**The number of shares of stock is: 100 SHARES @ 1.00 PER SHAREEffective Date 4/29/2020**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: PRES. MARIA SCHNEIDER Name and Title:Address: 19010 SW 188<sup>TH</sup> ST Address:MIAMI  
FLORIDA 33187Name and Title: VICE-PRES AMBER WILLIAMS Name and Title:Address: 19010 SW 188<sup>TH</sup> ST Address:MIAMI  
FLORIDA 33187

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_ Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: MARIA SCHNEIDER  
Address: 13295 SW 124 ST  
MIAMI, FL 33186

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: MARIA SCHNEIDER  
Address: 13295 SW 124 ST  
MIAMI, FL 33186

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TALLAHASSEE, FLORIDA

**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: 4-29-2020 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

X Maria Schneider  
Required Signature/Registered Agent

4-29-2020  
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

X Maria Schneider  
Required Signature/Incorporator

4-29-2020  
Date