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1/04/95 FLORIDA DIVIBION OF CORPORATIONS 1:12 PM PUBLIC ACCESS SYSTEM (((H9500000108))) ELECTRONIC FILING COVER SHEET TO DIVISION OF CORPORATIONS FROM: ACE INDUSTRIES. INC. DEPARTMENT OF STATE 54 NW 11TH ST STATE OF FLORIDA 409 EAST BAINES STREET MIAMI FL 33136-2890-0000-0000 TALLAHASSEE, FL 32399 FRIEDMAN CONTACT: LYNN FAXI (904) 922-4000 PHONE: (305) 358-2571 FAX: (305) 388-7832 (((H9500000010B))) DUCUMENT TYPE: FLORIDA PROFIT CORPORATION OR P.A. NAME: CARLOS PAZ TOURS CORPORATION FAX AUDIT NUMBER: H9500000010B CURRENT STATUS! REQUESTED DATE REQUESTED: 01/04/1995 TIME REQUESTED: 13:12:18 CERTIFIED COPIES: 1 CERTIFICATE OF STATUS: 0 NUMBER OF PAGES: 3 METHOD OF DELIVERY! FAX ESTIMATED CHARGE: \$122.50 ACCOUNT NUMBER: 070744001530 Note: Please print this page and use it as a cover sheet when submitting documents to the Division of Corporations. Your document cannot be processed without the information contained on this page. Remember to type the Fax Audi number on the top and bottom of all pages of the document. (((H95000000108))) ** ENTER 'M' FOR MENU. ** ENTER SELECTION AND CORP. Menus (Ctrl R-Shift) 2400 7E1 VT100 Onli

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ARTICLE OF INCORPORATION

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CARLOS PAZ TOURS CORPORATION

SECRETARY OF STATE SECRETARY OF STATE O

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida General Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I WAND

The name of the corporation shall be: CARLOS PAZ TOURS CORPORATION

The principal place of business of this corporation shall be: 692 W. 29 ST. STE 9, HIALEAH, FL. 33012

ARTICLE II MATURE OF BUSINESS

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United State, the State of Plorida, or any other state, country, territory or nation.

ARTICLE III CAPITAL STOCK

The aggregate number of shares of stock and its par value that this corporation is authorized to have outstanding at any one time is:

100 X \$ 10.00 = \$ 1,000.00

ARTICLE IV THEM OF EXISTENCE

This corporation is to exist perpetually.

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ARTICLE Y OFFICERS DIRECTOR!

The name(s) and street address(es) of the initial officer(s) if any, who shall hold office the first year of the corporation's existence or until their successor(s) is (are) elected, is(are):

Ruben Arturo Alcasar Director Roque Saens Pens 1831, Carlos Paz, Cordoba- Rep. Arg. (5152) C/O Mector J. Hall, 692 W. 29 St. Ste 9, Hialeah, Fl. 33012

Monica Alicia Soto Director
Roque Saenz Pena 1831, Carlos Paz, Cordoba- Rep. Arg. (5152)
C/O Hactor J. Hall, 692 W. 29 St. Ste 9, Hialan, Fl. 33012

ARTICLE VI INCORPORATOR 'S)

The name(s) and street address(es) of the Incorporator(s) to these Article of Incorporation is (are):

Ruber Arturo Alcasar President 50 Shares Roque Saens Pena 1831, Carlos Pas, Cordoba- Rep. Arg. (5152) C/O Hector J. Hall, 692 W. 29 St. Ste 9, Hialeah, Fl. 33012

Monica Alicia Soto Secretary & Treasurer 50 Shares Roque Saenz Pena 1831, Carlos Paz, Cordoba- Rep. Arg. (5152) C/O Mactor J. Hall, 692 W. 29 St. Ste 9, Hialesh, Fl. 33012

The undersigned has (have) executed these Article of Incorporation this __02th__day of__January_____,19_95__.

Signature/Title

Signature/Title

Signs ve/Title

CERTIFICATE OF DESIGNATION REGISTERED ASSISTANCE

Pursuant to the provisions of sections 607.0501 or 617.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Flurida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

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The name	and address of the registered agent an Nicolas Garcia	nd offi	ce 95
18	(Hame)	16- 21	HALB
	692 W. 29 St. Ste 00	.,,	1 - H
	(P. O. BOX NOT ACCEPTABLE)	in.	PH
	Hialeah, Fl. 33012	で に は は	بب
	(CITY/STATE/EIP)	CO EN	5

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESI AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FUR THER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMACE OF MY DUTIES AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS MY POSITION AS REGISTERED AGENT.

SIGNATURE_		
	7/	
DATE	01-02-95_	