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TRANSMITTAL LETTER

FILED

95 JUN 20 PH 1: 19

SECRETA: STATE TALLAHASSEE, FLORIDA

900001518529

*****78.75

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

SUBJECT: Four Se	easons Inter	national Inc.	*****78.7
(Proposed corporati	e name - must include s	uffix)
Enclosed is an original for : \$70.00 Filing Fee	and one (1) cop X \$78.75 Filing Fee & Certificate	oy of the articles of \$122.50 Filing Fee & Certified Copy	Incorporation and a check \$131.25 Filing Fee, Certified Copy & Certificate
FROM:	Hanna Kh Name	oury (printed or typed)	
	3082 Cas	cade Drive	
	•	Address	
	Clearwat	er FL 34625	
	ci	ity, State & Zip	
	(813) 46	1-4434	
	Daytime	Telephone number	

* Who

NOTE: Please provide the original and one copy of the articles.

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ARTICLES OF INCORPORATION

SECRETAL TALLAHASSEE, FLORIDA

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

ARTICLE | NAME

The name of the corporation shall be: Four Seasons International Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

483 Mandalay Ave. Suite 219A Clearwater Beach FL 34630

ARTICLE III SHARES

The number of shares of stock that his corporation is authorized to have outstanding at any one time is: This corporation is authorized to issue one thousand (1,000) shares of one dollar (\$1.00) par value Common Stock, Which shell be designated "Common Stock".

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Hanna Khoury 3082 Cascade Drive Clearwater FL 34625

ARTICLE V INCORPORATOR(S)

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

Hanna Khoury 3082 Cascade Drive. Cleawater FL 34625

The undersigned incorporator(s) has(have) execute	Articles of incorporation this
16 day of June 1	9 <u>95</u> .
Signature	
Signature	
Signature	· · · · · · · · · · · · · · · · · · ·

Articles of Incorporation Filing Fee - \$35

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CERTIFICATE OF DESIGNATION OF 95 JUN 20 PM 1: 19 REGISTERED AGENT/REGISTERED OFFICE MASSEE, FLORIDA

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: Four Seasons International Inc.		
2. The name and address of the registered agent and office is:		
Hanna Khoury		
(Name)		
483 Mandalay Ave. Suite 219A (P.O. Box not acceptable)		
Clearwater Beach FL 34630 (City/State/Zip)		

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

(Signature) 6/16/95 (Date)