P9500063782 TRANSMITTAL LETTER

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

600001563226 -08/17/95--01037--002 *****78.75 *****78.75

SUBJECT: CAS	INO CLUB TOUR Proposed corporate	NAMENT, INCORE	PORATED		
Enclosed is an origina for :	x \$78.75	\$122.50	\$131.25	and a check	
Filing Fee	Filing Fee & Cortificate	Filing Fee & Certified Copy	Filing Fee, Certified Copy & Certificate		
		Additional Copy			
FROM:	Name (Rose Crapp Stafford Name (printed or typed)			6
	15920	N.W. 27th Cour Address	t	7 PA SSEE.	
		cka, Florida , State & Zip	33054	AUG 17 PH 2:06 JIL JAIY OF STATE AHASSEE, FLORIDA	U
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25/1/95	Daytime *	Pelephone number Start Court Start Part To Take	or softing of	hand from it	ظممي
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NOTE: Please provide the original and one copy of the articles.

FILED

ARTICLES OF INCORPORATION

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IALLAHASSEE 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 I NAME

The name of the corporation shall be:

1.1

CASINO CLUB TOURNAMENT, INC.

ARTICLE II PRINCIPAL OFFICE

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

15920 N.W. 27th Court Opa Locka, Florida 33054

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 100 SHARES

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Rose Crapp Stafford 15920 N.W. 27th Court Opa Locka, Florida 33054

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

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

Rose Crapp Stafford 15920 N.W. 27th Court Opa Locka, Florida 33054

The und	ersigned inc	orporator(s) h	as(have) executed these Articles of Incorporation this
13	_ day of	July	, 19 <u></u> .
		Rose	Crop Stafford Signature
	<u> </u>		Signature
			Signature

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, 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:	CASINO CLUB TOURNAMI	ENT. INC.
2. The name and address of the register	ered agent and office is:	
Rose C	rapp Stafford (NAME)	
	N.W. 27th Court or Mail Drop Box NOT ACCEPTABLE)	
Opa_Loc	CKa. Florida 33054 (CITY/STATE/ZIP)	
Having been named as registered as corporation at the place designated in agent and agree to act in this capacity relating to the proper and complete per obligations of my position as registered	this certificate, I hereby accept the i. I further agree to comply with the formance of my duties, and I am fa	appointment as registered e provisions of all statutes
Robe Cupp Staff (SIGNATURE)	low July	12, 19 AL 99 ALGAHARA
DIVISION OF CORPORATIO	ONS, P. O. BOX 6327, TALLAHA	7 PH 2: 06 SSEE, FL 3500A

PATE PATE NUMBER NUMBER

STATE OF FLORIDA OFFICE OF STATE TREASURER TALLAHASSEE FLORIDA

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* FUND	ΔΜΟΠΝΊ	REASON RETURNED	KEY #	•	
GENERAL REVENUE	0.00	INSUFFICIENT FUNDS	1	*	
* TRUST	1 716.25	ACCOUNT CLOSED	2	*	2
OTHER		UNCOLLECTED FUNDS	3	*	
TOTAL	1,716.25	OTHER	4	*	

CROSS	DISTRIBUTION			
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GRAND TOTAL:

\$ 1,716.25

Process Date: 08/30/95

The above named fund(s) has been reduced by the amount of this check(s) under authority of Section 215.34, F.S.

State Treasurer

BILLY E. WOODS, JR. INSUFFICIENT AUG 2219926

15920 NW ZTH CT. COLOR 12 8 1935

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TTORIDA DEPARIMENTOL STATE Sandra B. Mortham Secretary of State

September 13, 1995

Billy E. Woods, Jr. 15920 NW 27th Ct. Opa Locak, FL 33054

SUBJECT: CASINO CLUB TOURNAMENT, INC.

Ref. Number: P95000063782

Debit Memo #: 60761-A

This is to inform you that your check #0126 dated August 14, 1995 in the amount of \$78.75 and submitted for CASINO CLUB TOURNAMENT, INC. has been returned to us by your bank because of Insufficient Funds.

We request that you remit a cashier's check or money order in amount of \$93.75 made payable to the Department of State. This amount will cover the unpaid check and the service fee required by law under section 215.34, Florida Statutes.

When sending the cashiers check or money order, please indicate the debit memo number and that it is a replacement for the returned check mentioned above.

Please note: The documents filed in this office with the returned check will be cancelled unless a replacement check is received within 30 days from the date of this letter. Send the replacement check to:

Division of Corporations Attn: Melinda Lilliston P.O. Box 6327 Tallahassee, FL 32314

If you have any questions concerning the returned check, please call (904) 487-6900.

Sincerely, Melinda Lilliston Administrative Assistant I Division of Corporations

Letter number: 495A00042109

cc:Casino Club Tournament, Inc. 15920 NW 27th Ct. Opa Locka, Fl. 33054



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

October 16, 1995

Billy E. Woods, Jr. 15920 NW 27th Ct. Opa Locka, FL 33054

SUBJECT: CASINO CLUB TOURNAMENT, INC.

Ref. Number: P95000063782

Debit Memo #: 60761-A

Due to your failure to respond to our previous letter advising you of the returned check #0126, the Articles of Incorporation for CASINO CLUB TOURNAMENT, INC. have been cancelled and are considered not filed at of October 16, 1995.

The name of your corporation is now available for use.

If you have any questions concerning the returned check, please call (904) 487-6900.

Sincerely Melinda Lilliston Administrative Assistant I Division of Corporations

Letter number: 395A00046578

cc:Casino Club Tournament, Inc. 15920 NW 27th Ct. Opa Locka, Florida 33054