

P95000063859

TRANSMITTAL LETTER

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

8000001548088
-07/27/95--01079--013
****122.50 ****122.50

SUBJECT: CBA SERVICES, INC.
(proposed corporate name)

Enclosed please find an original and one (1) copy of the articles of incorporation for the above corporation and check in the amount of \$ 122.50 .

FROM:

LIMITED ENTERPRISES, INC.
Name
8250 BIRD RD SUITE 911
Address
MIAMI, FL 33155
City, State, & Zip
(305) 270-1557
Telephone Number

55 AUG 17 1995
RECEIVED
DIVISION OF CORPORATIONS
TALLAHASSEE, FL

W95-15181

Note: Additional copy of articles is needed when certified copy is requested.

SHARON E. TALA

AUG 18 1995



FLORIDA DEPARTMENT OF STATE
Sandra B. McRham
Secretary of State

July 28, 1995

LIMITED ENTERPRISES, INC.
8250 BIRD RD., STE. 911
MIAMI, FL 33155

SUBJECT: CBA SERVICES, INC.
Ref. Number: W95000015181

We have received your document for CBA SERVICES, INC. and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of an entity name **DOES NOT** constitute a difference. Please select a new name and make the substitution in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

When the document is resubmitted, please return a copy of this letter to ensure that your document is properly handled.

If you have any questions about the availability of a particular name, please call (904) 488-9000.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6924.

Sharon Tala
Document Specialist Supervisor

Letter Number: 095A00035841

**ARTICLES OF CORPORATION
OF**

EXOTIC SERVICES, INC.

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:

EXOTIC SERVICES, INC.

ARTICLE II PRINCIPAL OFFICE

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

88005 OVERSEAS HWY, SUITE 9-102 ISLAMORADA, FL 33036

ARTICLE III CAPITAL STOCK

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

100 SHARES OF \$5.00 EACH (\$500.00)

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

JUAN JOSE OROZCO

**88005 OVERSEAS HWY SUITE 9-102
ISLAMORADA , FL 33036**

FILED
95 AUG 17 11 16
CLERK OF STATE
TALLAHASSEE FLORIDA

ARTICLE V INCORPORATOR (S)

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

JUAN JOSE ORZCO

88005 OVERSEAS HWY SUITE 9- 102
ISLAMORADA, FL 33036

The undersigned has (have) executed these Articles of Incorporation This

X 
Signature/President

PRESIDENT

Signature/Title

Signature/Title

**CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of sections 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:
EXOTIC SERVICES, INC.
2. The name and address of the registered agent and office is:

JUAN JOSE OROZCO

88005 OVERSEAS HWY SUITE 9- 102
ISLAMORADA, FL 33026

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



DATE

7/24/95