

P95000071232

Date AUGUST 12, 1995

SECRETARY OF STATE
CORPORATION DIVISION
STATE OF FLORIDA
TALLAHASSEE, FLORIDA 32304

FILED
95 SEP 12 PM 4:07
STATE OF FLORIDA

Re NATIVE ADVENTURES &
KING'S CHARTERS INC.

GENTLEMEN

ENCLOSED HERewith ARE THE ARTICLES OF
INCORPORATION TOGETHER WITH A COPY OF SAID ARTICLES FOR

NATIVE ADVENTURES & KING'S CHARTERS INC.

800001588208
-08/12/95--01120--019
*****70.00 *****70.00

FILING FEE	\$ 35.00
REGISTERED AGENT	\$ 35.00
	<hr/>
	\$ 70.00

RESPECTFULLY SUBMITTED,
ANDREW WINIKOFF

907
9-14-95

FILED

95 SEP 12 PM 4: 07

SEAL OF THE STATE
TALLAHASSEE, FLORIDA

CERTIFICATE OF INCORPORATION
of

NATIVE ADVENTURES & KING'S CHARTERS INC.

WE, THE UNDESIGNED, hereby associate ourselves together for purpose of becoming a corporation under the Laws of the State of Florida, by and under the provisions of the Statutes of the said State of Florida

ARTICLE I

This name of this corporation shall be

NATIVE ADVENTURES & KING'S CHARTERS INC.

ARTICLE II

The corporation may engage in any activity or business permitted under the laws of the United States and of the State of Florida

ARTICLE III

The maximum number of shares of capital stock that this corporation is authorized to have outstanding at any time is **FIVE HUNDRED (500)** shares of common stock having a par value of **ONE (\$1.00) DOLLAR PER SHARE.**

ARTICLE IV

The amount of capital with which this corporation will begin business shall be the sum of not less than **FIVE HUNDRED (\$500.00) DOLLARS.**

ARTICLE V

The corporation shall exist perpetually unless sooner dissolved according to law

ARTICLE VI

The initial street address of the principal office of the corporation shall be:

**9319 WEST SAMPLE ROAD
CORAL SPRINGS, FLORIDA 33065**

ARTICLE VII

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE
SERVICE OF PROCESS WITHIN THIS STATE, NAMING AGENT, UPON WHOM
PROCESS MAY BE SERVED

NATIVE ADVENTURES & KING'S CHARTERS INC.

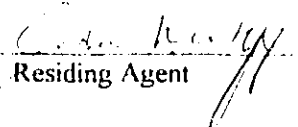
In pursuance of Chapter 48 091, Florida Statutes, the following is
submitted, in compliance with said Act

FIRST That **NATIVE ADVENTURES & KING'S CHARTERS INC.** desiring
to organize under the laws of the State of Florida with its principal offices as indicated in
the Articles of Incorporation, in the City of **CORAL SPRINGS** County of **BROWARD**,
State of Florida has named **ANDREW WINIKOFF**, located at **9319 WEST SAMPLE
ROAD, CORAL SPRINGS, FLORIDA**, as its agent to accept services of process
within this State

ACKNOWLEDGMENT

Having been named to accept services of process for the above stated corporation,
at the place designated in this certificate, I hereby accept to act in this capacity, and agree
to comply with the provisions of said ACT relative to keeping open said office

BY


Residing Agent

FILED
35 SEP 12 PM 4: 07
STATE
FLORIDA

P95000071232

LAUDERDALE UNDERSEA ADVENTURES
2150 SE 17th STREET SUITE #101
FT LAUDERDALE, FL 33318
(305) 527-0187

(City, State, Zip)

(Phone #)

OFFICE USE ONLY

7000001624147
-10/31/95--01036--008
*****35.00 *****35.00

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. _____
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

- ☐ Walk in ☐ Pick up time _____ ☐ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

RECEIVED
OCT 30 PM 1:48
TALLAHASSEE, FLORIDA

Examiner's Initials

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT
OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes,
the undersigned corporation organized under the laws of the State of FLORIDA
submits the following statement in order to change its registered office or registered agent, or
both, in the State of Florida.

1a. The name of the corporation is: NATIVE ADVENTURES & KINGS
CHARTERS INC

1b. The mailing address of the corporation is: 3152 SE 17th St
Fort Lauderdale, FL 33316

1c. Date of incorporation: 9/12/93 Document number: P9500007123.2

2. The name and address of the current registered agent and office:

Andrew Almkoff
9319 West Saddle Road Suite 201
Coral Springs, FL 33065

3. The name and address of the new registered agent and office: (P.O. Box Not Acceptable)

WILLIS LANSON KING JR
2152 SE 17th St
Fort Lauderdale, FL 33316

The street address of its registered office and the street address of the business office of its
registered agent, as changed, will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer
so authorized by the board.

Willis Lanson King Jr
(Signature of an officer, chairman or
vice chairman of the board)

10/8/95
(Date)

WILLIS LANSON KING JR
(Printed or typed name and title)

Having been named as registered agent and to accept service of process for the above stated
corporation, 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 relative to the proper and complete
performance of my duties, and I am familiar with and accept the obligation of my position as
registered agent.

Willis Lanson King Jr
(Signature of Registered Agent)

10/8/95
(Date)

If signing on behalf of an entity:

NATIVE ADVENTURES & KINGS (CHARTERS) INC
(Typed or Printed Name)

President
(Capacity)

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

FILING FEE: \$35.00