P900000 8448/

10194 N.W. 47 STREET SUNRISE, FL 33351

Florida Department of State Division of Corporations P.O. Box 6327 or George Firestone Building 409 E. Gaines Street Tallahassee, FL 32399

Dear Department of State:

Enclosed please find the Articles of incorporation for: HEMISPHERES CONCESSIONS, INC.

Also enclosed is a check in the amount of \$70.00 covering filing fees.

If you have any questions, please do not hesitate to call me at: (305) 742-0909.

Sincerety,

95 0CT -9 AN 8:

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****70.00 *****70.00

The undersigned for the purpose of foregoing a corporation under the Florida General Corporation Act, do hereby adopt the following articles of incorporation.

Article 1. Corporate name and address

The name of the corporation is: The address will be:

HEMISPHERES CONCESSIONS, INC. 2445 S.W. 18 TERRACE, FT LAUDERDALE, FL

Article 2. Term of Existence

The duration of the corporation is perpetual, to be commenced with the Department of State of the State of Florida.

Article 3. Nature of business

To transact any lawful business for which corporations may be incorporated under the Florida General Corporations Act.

Article 4. Authorized shares

The agggregate number shares which the corporation is authorized to issue is: 1000 shares

Such shares shall be of single class and shall have a par value of \$1.00 per share.

Article 5. Initial Agent

The name of the initial registered agent is: The address of the initial registered agent:

ALLAN WATSON

2445 S.W. 18 TERRACE, #410 FT. LAUDERDALE, FL 33315

ALLAN WATSON

hereby am familar with and accept the duties and responsibilities as registered agent for said corporation,

10/02/91

date

Article 6. Initial Board of Directors

There will be one initial director:

The name of the initial director is: The address of the initial director:

ALLAN WATSON 2445 S.W. 18 TERRACE, #410 FT. LAUDERDALE, FL 33315

Article 7. Incorporator

The name of the initial incorporator will be: The address of the initial incorporator is:

ALLAN WATSON 2445 S.W. 18 TERRACE, #410 FT. LAUDERDALE, FL 33315

Executed on: OCTOBER 1, 1996

By:_____

STATE OF FLORIDA

COUNTY OF BROWARD

I hereby certify that on this 7 day of UT, 1996, be appeared AURN WATON	•
Director of HBMISPHENC'S CONCESSION, INC	
under the laws of the State of Florida to me known in and who executed the foregoing instrument and execution thereof to be their free act and deed as and purposes therein mentioned; and the said inst of said corporation.	to be the person described severally acknowledged the
Witness my signature and official seal on , 1996	5, in the county of Broward

Notary Public

and the State of Florida.

State of Florida

State of Florida

ROBERT H. COHEN

My Comm Exp. 5/05/98

Bonded By Service Ins

No. CC360893

[] Percelly Harris [] What LD.