## 970 ASM RAD RED 86730

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

SUBJECT:	Tropical Fantary Co		C						
	(Рторозей согро	rate nanue - must include suff	.00023122684 -10/06/9701064008 ******78.75 ******78.75						
Enclosed is an original and one(1) copy of the articles of incorporation and a check for :									
S70.4 Filing F		S122.50 Filing Fee & Certified Copy	S131.25 Filing Fee, Certified Copy & Certificate						
		ADDITIONAL CO	PY REQUIRED						
FROM: J-M Business & Tax Services  Name (Printed or typed)									
7061 Gran National Drive, Suite 105-E									
	Onlando Fl., 32819  City, State & Zip								

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

Daytime Telephone number

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## ARTICLES OF INCORPORATION

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:

Tropical Fantasy Conp.

ARTICLE II PRINCIPAL OFFICE

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

97 OCT -6 AH 9: 26
SECRE FARY OF STATE
TALLAHASSEE. FLORID

11952 Reedy Creek Dr. Onlando Florida 32836

ARTICLE III SHARES

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

200 Non Par Value

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Ydelize Diaz 11952 Reedy Creek Dr. Orlando Florida 32836

## 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):

YdeLize Diaz 11952 Reedy Creek Dr. Orlando Florida 32836

The unc	lersigned in	corporator(s) ha	as(have) exe	ecuted these Articles of Incorporation t	his
/st	_ day of _	October	· · · · · · · · · · · · · · · · · · ·	, 19 <u>97</u> .	
(An add	itional articl	e must be adde	d if an effec	tive date is requested.)	
	_	Eddize	Sias	Signature	
				o.g.m.m.c	
	_			Signature	_
				Signature	<del></del>

Notarization is not required

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 corpo	ration is Tropical Fantary Corp.	
		i e
2. The name and address	of the registered agent and office is:	
	W. L. T. D.	
	Ydelize Diaz (NAME)	<b></b>
	11952 Reedy Creek Dr.	97 OCT SECRET ALLARIA
	(P. O. Box or Mail Drop Box NOT ACCEPTABLE)	OCT -6 CRETARY LAHASSE
	Onlando Flonida 32836	E. F.
	(CITY/STATE/ZIP)	1 ST
Transfer of		26 RIBA

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.

Halist Jas 10/0,/97 (SIGNATURE) (DATE)