

P. 97000094072

Requestor's Name
 Address
 City/State/Zip
 Phone #

Office Use Only

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

- Sunny Isles Beach Chamber of Commerce
 (Corporation Name) (Document #)
- _____
 (Corporation Name) (Document #)
- _____
 (Corporation Name) (Document #)
- _____
 (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

FILED
 97 NOV -3 PM 1:52
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA
 RECEIVED
 97 NOV -3 AM 8:35
 DEPARTMENT OF STATE
 DIVISION OF CORPORATIONS
 TALLAHASSEE, FLORIDA

600002335666-4
 -11/03/97-01004-012
 *****70.00 *****70.00

Examiner's Initials g 11/3/97

CERTIFICATE OF INCORPORATION
-of-
SUNNY ISLES BEACH CHAMBER OF COMMERCE, INC.

FILED
97 NOV -3 PM 1:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

THE UNDERSIGNED, HEREBY ASSOCIATES THEMSELVES TOGETHER FOR THE 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 - NAME

THE NAME OF THIS CORPORATION SHALL BE:
SUNNY ISLES BEACH CHAMBER OF COMMERCE, INC.

ARTICLE II - PURPOSE

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 - STOCK

THE MAXIMUM NUMBER OF SHARES OF CAPITAL STOCK THAT THIS CORPORATION IS AUTHORIZED TO HAVE OUTSTANDING AT ANY ONE TIME IS FIVE HUNDRED (500) SHARES OF COMMON STOCK, HAVING A PAR VALUE OF ONE (\$1.00) DOLLAR PER SHARE.

ARTICLE IV - CAPITAL

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 - CORPORATE DURATION

THE PERIOD OF DURATION OF THIS CORPORATION ONCE CORPORATE EXISTENCE IS ESTABLISHED IS PERPETUAL.

ARTICLE VI - MAILING ADDRESS

THE MAILING ADDRESS OF THE CORPORATION SHALL BE:

% WENDY ROSEMA
851 NORTH BEVERLY GLEN DR
BEVERLY HILLS, CALF. 90077

ARTICLE VII - BOARD OF DIRECTORS

THE NUMBER OF DIRECTORS OF THIS CORPORATION SHALL BE AT LEAST ONE (1) AND NO MORE THAN FIVE (5).

ARTICLE VIII

THE NAMES AND STREET ADDRESSES OF THE MEMBERS OF THE FIRST BOARD OF DIRECTORS OF THIS CORPORATION ARE AS FOLLOWS.

WENDY ROSEMA	851 NORTH BEVERLY GLEN DR.
PRESIDENT	BEVERLY HILLS, CALF. 90077
HARUMI TAKEKAWA	851 NORTH BEVERLY GLEN DR.
TRES.	BEVERLY HILLS, CALF. 90077

ARTICLE IX

THE NAMES AND STREET ADDRESSES OF THE PERSONS SIGNING THSES ARTICLES OF INCORPORATION AS SUBSCRIBED IS A FOLLOWS:

REX REKSTIS	5795 SPLIT OAK LANE
	TALLAHASSEE, FL 32303

ARTICLE - X

THE CORPORATE EXISTENCE OF THIS CORPORATION SHALL BEGIN ON THE DATE THE ARTICLES OF INCORPORATION ARE FILED OF RECORD.

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN THIS STATE, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED IN PURSUANCE OF CHAPTER 48.091, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED IN COMPLIANCE WITH SAID ACT:

FIRST; THAT SUNNY ISLES BEACH CHAMBER OF COMMERCE, 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 TALLAHASSEE COUNTY OF LEON STATE OF FLORIDA, HAS NAMED CORPORATE RESEARCH SERVICES, LOCATED AT 5795 SPLIT OAK LANE . TALLAHASSEE, FLORIDA 32303

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.

SIGNATURE: _____

REGISTERED AGENT/INCORPORATOR

DATE _____

11-2-97

FILED
97 NOV -3 PM 1:53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA