

TRANSMITTAL LETTER

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

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-04/20/98--01062--008

\*\*\*\*\*78.75 \*\*\*\*\*78.75

SUBJECT: Custom Tours USA, Inc  
(Proposed corporate name - must include suffix)

Enclosed is an original and one (1) copy of the articles of incorporation and a check for :

☐ \$70.00  
Filing Fee

☒ \$78.75  
Filing Fee  
& Certificate

☐ \$122.50  
Filing Fee  
& Certified Copy

☐ \$131.25  
Filing Fee,  
Certified Copy  
& Certificate

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FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

FROM: Custom Tours USA - Peter VerKaik  
Name (printed or typed)

P.O. Box 520851  
Address

Longwood, FL 32750  
City, State & Zip

(407) 834-7384 Barbara Sullivan  
Daytime Telephone number Bookkeeper

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

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**ARTICLES OF INCORPORATION  
OF  
CUSTOM TOURS USA, INC.**

The undersigned incorporator delivers these Articles of Incorporation in order to form a corporation under the Florida Business Corporation Act.

**ARTICLE I**

**Name**

The name of the Corporation shall be **Custom Tours USA, Inc.**

**ARTICLE II**

**Principal Office**

The principal office of the Corporation is located at **416 N. Federal Hwy., Ft. Lauderdale, FL 33301** and its mailing address shall be **P.O. Box 520851 Longwood, FL 32752-851.**

**ARTICLE III**

**Corporate Purposes, Power and Rights**

The purpose of the Corporation is to engage in any activity or business permitted under the laws of the United States and the State of Florida.

**ARTICLE IV**

**Duration of the Corporation**

Existence of the Corporation shall commence on the date all fees are paid and these Articles of Incorporation are filed by the Secretary of State and the Corporation shall exist perpetually unless dissolved according to law.

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## ARTICLE V

### Authorized Stock

The total number of shares of capital stock which the Corporation has the authority to issue is 10,000 share of Common Stock, with a \$1.00 par value per share.

## ARTICLE VI

### Registered Office and Registered Agent

The street address of the initial registered office of the Corporation in the State of Florida shall be **416 N. Federal Hwy, Ft. Lauderdale, FL 33301** and it's mailing address shall be **P.O. Box 520851, Longwood, FL 32752-851**. The name of the initial registered agent of the Corporation at the registered office shall be **Christoph A. Matti**.

## ARTICLE VII

### Initial Board of Directors

The initial Board of Directors shall consist of one (1) director. The name and address of the person who shall serve as director of the Corporation until the first meeting of shareholders is:

<u>Name</u>	<u>Address</u>
Peter Verkaik	Numansgors 80 Numansdorp, 3281HA The Netherlands

## ARTICLE VIII

### Incorporator

<u>Name</u>	<u>Address</u>
Peter Verkaik	Numansgors 80 Numansdorp, 3281HA The Netherlands

Executed this 15<sup>th</sup> day of April, 1998.

  
Peter Verkaik, Incorporator

**ACCEPTANCE OF REGISTERED AGENT**

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.



\_\_\_\_\_  
Christoph A. Matti  
Registered Agent

Date: 4/1/8

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