# PAS TRANSMITTAL LETTER

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

SURJECT:	EXOTIC CARIBBEING TOURS, INC.	
<del></del>	(Proposed corporate name - must include suffix)	

200002499132--3 -04/24/98--01001--008

Enclosed is an original and one(1) copy of the articles of incorporation and a check for: \*\*\*\*131.25 \*\*\*\*\*131.25

\$70.00	)
Filing Fee	

☐ \$78.75
Filing Fee
& Certificate

☐\$122.50 Filing Fee \$131.25

& Certified Copy

Filing Fee, Certified Copy

& Certificate

ADDITIONAL COPY REQUIRED

FROM:	PATRICIA TRIOLET
	Name (Printed or typed)
	10715 SW 190 Street, Bay 44
	Address
	MIAMI, FLORIDA 33157 City, State & Zip
	City, Suite & Zip
	(305) 278-7644 OR 254-3850
	Device Telephone number

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

Bc 4/24

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## ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

### ARTICLE I NAME

The name of the corporation shall be:

EXOTIC CARIBBEING TOURS, INC.

#### <u>ARTICLE II PRINCIPAL OFFICE</u>

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

10715 SW 190th Street, Miami, FL 33157

#### ARTICLE III SHARES

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

100

# ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Patricia Triolet

10769 SW 225th Terrace, Miami, FL 33170

#### ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

Patricia Triolet, 10769 SW 225 Terrace, Miami, FL 33170

Sowdi Amenihotatos.

Patricia Triolet Darien F. Rodriguez Gilbert Gambino Fernando E. Triolet 4 (4 98 Date

President Vice President Treasurer Secretary

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

Signature Registered Agent

14198

Date