

P98000044163

TRANSMITTAL LETTER

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

700002523327--4
-05/14/98--01048--015
*****78.75 *****78.75

SUBJECT: RTS TOURS + TRANSPORTATION, Inc.
(Proposed corporate name - must include suffix)

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

<input type="checkbox"/>	\$ 70.00	<input checked="" type="checkbox"/>	\$ 78.75	<input type="checkbox"/>	\$ 122.50	<input type="checkbox"/>	\$ 131.25
Filing Fee		Filing Fee & Certificate		Filing Fee & Certified Copy		Filing Fee & Certificate	

FROM:

Constantino Karfitsas

Name (print or type)

632 N SEMORAN Blvd

Address

Orlando FL 32807

City, State & Zip

(407) 384-2234

Daytime Telephone number

FILED
98 MAY 14 PM 1:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NOTE: PLEASE PROVIDE THE ORIGINAL AND ONE COPY OF THE ARTICLES

CB
5/15/98

ARTICLES OF INCORPORATION

FILED
98 MAY 14 PM 1:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

RTS TOURS & TRANSPORTATION, INC.

ARTICLE II PRINCIPAL OFFICE

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

632 N SEMORAN BLVD
ORLANDO, FL 32807

ARTICLE III SHARES

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

6000 shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

CONSTANTINO KARTITSAS
4840 CASON COVE DR
APT 103
ORLANDO, FL 32819

ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Constantino Karfittas
4840 Cason Cove Drive
Apt 103
Orlando, FL 32819

The undersigned incorporator(s) has (have) executed these Articles of Incorporation this

8 day of MAY, 1998.

X 

Signature

X

Signature

Signature

CERTIFICATE OF DESIGNATION OF

REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 OR 617.0501, 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 corporation is: RTS TOURS &
TRANSPORTATION, Inc.

2. The name and address of the registered agent and office is:

Constantino Karfitsas
(Name)

632 N SEMORAN BLVD
(P.O. Box not acceptable)

Orlando FL 32807
(City, State, Zip)

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TALLAHASSEE, FLORIDA

Having been named as registered agent and to accept service of process for the above stated corporation at the place designed 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)