OFFICE UE ONLY (Document #)	256460
LAZARUS CORPORATE FILING SERVICE INC. (Requestor's Name) 3320 S.W. 87th AVENUE (Address) MIAMI, FLORIDA (305)552-5973 (City, State, Zip) (Phone #) LOCAL REPRESENTATIVE TALLAHASSEE	7000025710479 -06/24/9801057018 ****122.50 ****122.50
CORPORATION NAME(S) & DOCUMENT NUMI 1. HOLIDAY CONNECT (Corporation Name) 2.	BER(S) (if known):
3. (Corporation Name) 4. (Corporation Name) Walk in Pick up time Mail out Will wait Photocopy	(Document #) (Document #) (Document #) (Document #) (Document #) (Document #) (Certified Copy Certificate of Status (Document #) (Document #)
Profit NonProfit Limited Liability Domestication Other OTHER FILNGS Annual Report Fictitious Name Name Reservation Name Reservation Name Reservation Profit Amendment Resignation of R Change of Registr Change	ered Agent lrawal A., Officer/Director ered Agent lrawal

CR2E031(9/92)

Examiner's Initials

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:

HOLIDAY CONNECTION, INC.

98 JUN 24 PM 1: 26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

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

12020 SW 109 AVENUE

MIAMI, FL. 33176

ARTICLE III SHARES

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

100 SHARES

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

PHILIP FAHMIE

12020 SW 109 AVENUE

MIAMI, FL. 33176

ARTICLE V INCORPORATOR(S)

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

PHILIP FAHMIE (P) ELISA FAHMIE (VP) 12020 SW 109 AVENUE MIAMI, FLORIDA33176

ARTICLE VI DIRECTOR(S)

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

PHILIP FAHMIE (P)
ELISA FAHMIE (VP)
12020 SW 109 AVENUE
MIAMI, FLORIDA 33176

The undersigned inc Incorporation this	orporator(s) 23	has(have day of) executed the	ese Articles of , 19_ ₉₈
	-	Rliz	Signature	<u> </u>
	-	Ma	hmie Signature	
			Signature	

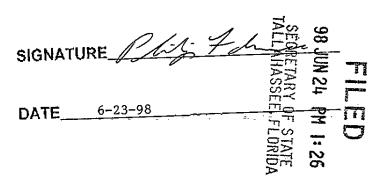
Articles of Incorporation Filing Fee - \$35

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 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.

The name and address of	the registered agent and office is:
PHILIP FAHMIE	(NAME)
12020 SW 109 AVENUE	BOX NOT ACCEPTABLE)
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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.



REGISTERED AGENT FILING FEE: \$35.00