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6/25/98

## FLORIDA DIVISION OF CORPORATIONS PUBLIC ACCESS SYSTEM ELECTRONIC FILING COVER SHEET

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TO: DIVISION OF CORPORATIONS

FAX #: (850)922-4001

FROM: FAS-T CORP. AGENTS, INC.

PHONE: (305)599-0839

ACCT#: 071001002335

CONTACT: LIDIA FERNANDEZ

FAX #: (305)716-0346

NAME: TROPICAL SPA INC.

AUDIT NUMBER..... H98000011867

DOC TYPE.....FLORIDA PROFIT CORPORATION OR P.A.

CERT. OF STATUS...1

PAGES..... 3
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98 JUN 26 PH 12: 35
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TALLAHASSEE, FLORINA

m 6/26/98



#### FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

June 26, 1998

FAS-T CORP. AGENTS, INC.

SUBJECT: TROPICAL SPA INC.

REF: W98000014683

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

You failed to make the correction(s) requested in our previous letter.

The document submitted does not meet legibility requirements for electronic filing. Please do not attempt to refax this document until the quality has been improved.

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If you have any further questions concerning your document, please call (850) 487-6926.

Tracy Augsburger Document Specialist FAX Aud. #: H98000011867 Letter Number: 398A00035054

### 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:

Tropical Spa Inc.

JUN 26 PN 12: RETAKT OF STAT AHASSEE, FLORI

ARTICLE II PRINCIPAL OFFICE

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

7815 Coral way #109 Miami, Fl 33155

#### ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 1,000 shares at \$1.00 par value.

#### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Vincent A Jones 9686 Fontaine bleau Blvd # 304 Miami, Fl 33172

PREPARED BY:VINCENT A. JONES
9686 Fountainbleau Blvd. #304
Miami, Fl. 33172
011867 (305) 264-5400

Articles of Incorporation Filing Fee - \$35

Signature

## 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 of the corporation is: Tropical Spa Inc.
The name and address of the registered agent and office is:
- Vincent A Jones
(NAME)
9686 Fontainebleau Blvd #304
(P.O. BOX <u>NOT</u> ACCEPTABLE)
M/ami, F1 33172
(CITY/STATE/ZIP)

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.

DATE 6-23-98 JUN 26 PM 12: 35

REGISTER D AGENT FILING FEE: \$35.00