### TRANSMITTAL LETTER

# P98000063066

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

300002589463--2 -07/15/38--01025--018 \*\*\*\*\*\*78.75 \*\*\*\*\*\*78.75

SUBJECT:

BEST FLORIDA TOURS, 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

\$131.25

Filing Fee

Filing Fee,

& Certified Copy

Certified Copy

& Certificate

ADDITIONAL COPY REQUIRED

FROM: KONSTANCA C. LELUTIU

Name (Printed or typed)

410 N. FEDERAL HWY. SUITE F

Address

HALLANDALE? FLORIDA 33009

City, State & Zip

(954) 454-4992

Daytime Telephone number

98 JUL 15 AMIO: 24 SECRETARY OF STATE TALLAHASSEE, FLORIDA

APPROVED AND FILED

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

# ARTICLES OF INCORPORATION OF BEST FLORIDA TOURS, INC.

FILED
98 JUL 15 AM 10: 24
SECRETARY OF STATE
TALL ANASSEE. FINASE.

# ARTICLE I

The name of the corporation and the principal place of business

Name:

BEST FLORIDA TOURS, INC.

Address:

410 N. FEDERAL HWY. SUITE F

HALLANDALE, FLORIDA 33009

# ARTICLE II

#### **PURPOSE**

This corporation is organize for the purpose of sale and conduct tours.

#### ARTICLE III

This corporation authorize to issue 100 shares of no par value common stock.

# ARTICLE IV

Every shareholder, upon the sale for cash of any new stock of this corporation of the same kind or as that which he already holds, shall have the right to purchase his prorata share thereof at a price at which it is offered to others.

# ARTICLE V

# INITIAL REGISTRATERED OFFICE AND AGENT

The street address of the initial registered office of this corporation is:

410 N. Federal Hwy. Suite F Hallandale, Florida 33009

The name of the initial registratered agent of this corporation at that address is:

## Konstanca C. Lelutiu

#### ARTICLE VI

### **DIRECTORS**

The business of this corporation shall be managed by the shareholders of the corporation, and such shareholders should be deemed directors of the corporation.

The name and address of the initial directors of the corporation are:

**Emil Lelutiu** 

and

Dan Georgian

825 S. 10th Ave.

4600 Van Buren

Hollywood, Florida 33019

Hollywood, Florida 33021

# ARTICLE VII

# **POWERS**

This corporation shall have all of the powers enumerated for corporations under laws of the Sate of Florida.

# ARTICLE VIII NAME OF INCORPORATOR

The name and address of the persons signing these Articles of Incorporation as Subscriber/Incorporator are:

**Emil Lelutiu** 

and

Dan Georgian

825 S. 10th Ave

4600 Van Buren

Hollywood, Florida 33019

Hollywood, Florida 33021

In witness Whereof, the undersigned subscribers have executed these Articles of Incorporation this /2 day of July, 1998.

Emil Lelutiu

Dan Georgiai

# STATE OF FLORIDA COUNTY OF BROWARD

The foregoing instrument was acknowledged before me this /2 day of July 1998, by Emil Lelutiu and Dan Georgian (X) who are personally known to me and who (X) did not take an oath.

Gloria J. Dunn Notary Public

My Commission expires:

GLORIA JUNE DUNN My Comm Exp. 8/24/98

Bonded By Service Ins
No. CC402805

Personally Known [] Other LD

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN THIS STATE, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED.

In pursuance of Chapter 48.091, Florida Statues, the following is submitted, in compliance with said Act:

First; That "Best Florida Tours, Inc."

Desiring to organize under the law of the State of Florida, with its principal office, as indicated in the Article of Incorporation at the City of Hallandale, county of Broward, State of Florida.

Has named KONSTANCA C. LELUTIU located at 410 N. Federal Hwy. Suite F, City of Hallandale, County of Broward, Sate of Florida, as its Agent to accept services of process within this state.

ACKNOWLEDGMENT; (Must be signed by designated Agent).

Having been named to accept service of process for the above corporation, at place designated in this certificate, I hereby accept to act in this capacity, and agree to comply with the provision of the said Act relative to keeping open said office.

Signature:

Konstasnca C. Lelutiu

98 JUL 15 AM 10: 24
SECRETARY OF STATE
TALL AHASSEF, FLORID.