Departmer Division of Corporations

P.O. Box 6327 Tallahassee, FL 32314

SUBJECT:	AMERICAN	DREAM	TRAVEL,	INC.	
	(Proposed cornorate name - must include suffix)				

- Enclosed is an original and one(1) copy of the articles of incorporation and a check for:
 - □ \$70.00
- **3** \$78.75
- Filing Fee Filing Fee
 - & Certificate
- \$122.50
- **X** \$131.25
- Filing Fee
- Filing Fee,
- & Certified Copy
- Certified Copy
- & Certificate

ADDITIONAL COPY REQUIRED

ROBERT E. BURNETT Name (Printed or typed)

20533 BISCAYNE BLVD #4-N143

AVENTURA FL 33180-1529 City, State & Zip

954-456 - 6788 Daytime Telephone number

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

ARTICLES OF INCORPORATION

OF

AMERICAN DREAM TRAVEL, INC.



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: AMERICAN DREAM TRAVEL, INC.

ARTICLE II PRINCIPAL OFFICE

The address of the principal office of this corporation shall be 20533 Biscayne Blvd #4-N143, Aventura, Florida 33180-1529 and the mailing address of the corporation shall be P. O. Box 801608, Miami FL 33280-1608.

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 of common stock having no par value per share.

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent Robert E. Burnett, 20533 Biscayne Blvd #4-N143, Aventura, Florida 33180-1529.

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are Robert E. Burnett, 20533 Biscayne Blvd #4-N143, Aventura, Florida 33180-1529.

Signature/Incorporator

Date

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

Date

98 JUL 27 AM ID: 11
SECHETYSSEE FLORIDA