74800000077677

Department of State Division of Corporations

P. O. Box 6327 Tallahassee, FL 32314			
SUBJECT: ALOHA BEACH (Proposed corporate	name - must include suffix	NC.	
		****131.	301044 008
Enclosed is an original and one(1) copy of the articles	of incorporation and a c	heck for:	
☐ \$70.00	□\$122.50 Filing Fee & Certified Copy	\$131.25 Filing Fee, Certified Copy & Certificate	
ADDITIONAL COPY REQUIRED			
FROM: ALOHA BEACH Name (Prin 909 Beville R Ad DAYTONA BE	ted or typed) POG dress	NC RECKE ANSSEE, FLORID	FILED 98 SEP -8 MI ID: 07
DAYTONA BCK, FC 32120 City, State & Zip			

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

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

98 SEP -8 M IO: 0
SECRETARY OF STATE
TALLAHASSEE, FLORID

ARTICLE I NAME

The name of the corporation shall be:

ALOHA BEACH MOTEL, INC.

ARTICLE II PRINCIPAL OFFICE

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

1431 S. ATLANTIC AU BOX 9988 DAYTONA BEACH, FC 32120

ARTICLE III SHARES

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

(1000) ONE THOUSAND

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

ROBERT M. CROASMUN 909 BEVILLE RD DAYTONA BEACH, FL 32120

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

Robert M. CROASMON 909 Beville Rd BOX 9988 DANTMA DEACH, FL 32120

Juff Joseph Signature/Incorporator

9-3-98 Date

(An additional article must be added if an effective date is requested.)

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 fegisteped agent

Signature/Registered Agent

Date