

TRANSMITTAL LETTER

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

P99 0000 12193

SUBJECT: AIR Bounce, INC.

(Proposed corporate name - must include suffix)

000002764840--1
-02/04/99--01068--016
*****70.00 *****70.00

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 of Status

☐ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status.

ADDITIONAL COPY REQUIRED

FROM:

CARLOS E. CASTILLO

Name (Printed or typed)

20250 SW 183 CT

Address

MIAMI FL 33031

City, State & Zip

(305) 248-2338

Daytime Telephone number

FILED
99 FEB -4 PM 1:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

F. CHESNEY
FEB 8 1999

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.

ARTICLE I NAME

The name of the corporation shall be:

Air Bounce, INC.

ARTICLE II PRINCIPAL OFFICE

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

26250 SW 183 CT
MIAMI, FL 33031

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 SHARES)

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

CARLOS E. CASTILLO
26250 SW 183 CT
MIAMI, FL 33031

ARTICLE V INCORPORATOR

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

CARLOS E. CASTILLO
26250 SW 183 CT
MIAMI, FL 33031



Signature/Incorporator

2/1/99

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 registered agent



Signature/Registered Agent

2/1/1999

Date

FILED
99 FEB -4 PM 1:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA