

Charter Number Only

**P9900064986**

**DRUNO SARTORI**  
 Requestor's Name  
**275 Commercial Blvd #260**  
 Address  
**Lauderdale by the Sea, FL 33308**  
 City State ZIP Phone

**(954) 351-1154A**

VALIDATION ONLY

**900002938219--0**  
 -07/22/99-01015-013  
 \*\*\*\*\*70.00 \*\*\*\*\*70.00

CORPORATION(S) NAME

**Aethra Sailing, INC**

**FILED**  
 99 JUL 22 PM 12:47  
 SECRETARY OF STATE  
 TALLAHASSEE FLORIDA

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|--|--|---|
| <input checked="" type="checkbox"/> Profit         | <input type="checkbox"/> Amendment       | <input type="checkbox"/> Merger                     |
| <input type="checkbox"/> NonProfit                 | <input type="checkbox"/> Dissolution     | <input type="checkbox"/> Mark                       |
| <input type="checkbox"/> Foreign                   | <input type="checkbox"/> Annual Report   | <input type="checkbox"/> Other                      |
| <input type="checkbox"/> Limited Partnership       | <input type="checkbox"/> Reservation     | <input type="checkbox"/> Change of Registered Agent |
| <input type="checkbox"/> Reinstatement             | <input type="checkbox"/> Photo Copies    | <input type="checkbox"/> Certificate Under Seal     |
| <input checked="" type="checkbox"/> Certified Copy | <input type="checkbox"/> Call When Ready | <input type="checkbox"/> Call If Problem            |
| <input type="checkbox"/> Call When Ready           | <input type="checkbox"/> Will Wait       | <input checked="" type="checkbox"/> Pick Up         |
| <input type="checkbox"/> Walk In                   | <input type="checkbox"/> Will Wait       | <input type="checkbox"/> After 4:30                 |
| <input type="checkbox"/> Walk In                   | <input type="checkbox"/> Will Wait       | <input type="checkbox"/> Mail Out                   |

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 99 JUL 22 AM 9:19

**Empire Toll Free: 1-800-432-3028**

## 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:

**Aethra Sailing, Inc.**

### ARTICLE II PRINCIPAL OFFICE

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

275 Commercial Blvd., Suite 260  
Lauderdale by the Sea, Florida 33308

### ARTICLE III SHARES

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

100 @ \$ 1 per share

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

The name and address of the initial registered agent is:

Bruno Sartori  
275 Commercial Blvd., Suite 260  
Lauderdale by the Sea, Fla 33308

**ARTICLE V INCORPORATOR(S)**

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is (are):

Bruno Sartori  
275 Commercial Blvd. Suite 260  
Lauderdale by the Sea, Fla. 33308

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this  
\_\_\_\_ 21 \_\_\_\_ day of \_\_\_\_ July \_\_\_\_, 19 99 \_\_\_\_.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

**ARTICLES OF INCORPORATION  
FILING FEE - \$35**

Notary Public State of Florida  
SANDY GETZ  
Commission # CC746497  
Expires 7 / 23 / 2002

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 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.

1. The name of the corporation is:

Aethra Sailing, Inc.

2. The name and address of the registered agent and office is:

Bruno Sartori

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275 Commercial Blvd, Suite 260

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Lauderdale by the Sea, Fla. 33308

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*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)

(Date)

DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32304

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