

P04000099039

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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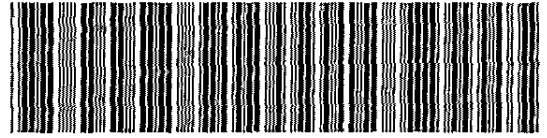
(Business Entity Name)

(Document Number)

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FILED  
04 JUN 29 PM 3:51  
STATE  
SECRETARY OF FLORIDA  
TALLAHASSEE

CD 6-30

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

To Whom It May Concern,

I currently own a business, Island Rentals that is registered as a sole proprietorship. I would like to register this business as a Corporation. I have filled out the following forms to register Island Rentals as a Corporation. The current Certificate Number for Island Rentals is 54-8012954156-0. The Name Registration Number is G03309700052.

If you need any further information I can be reached at (305) 587-4743 or at

[mmoefitz@aol.com](mailto:mmoefitz@aol.com)

Thank you,

*Maureen Fitzsimmons*

Maureen Fitzsimmons  
Island Rentals  
P.O. Box 4272  
Key West, FL. 33041



FLORIDA DEPARTMENT OF STATE  
Glenda E. Hood  
Secretary of State

June 18, 2004

MAUREEN FITZSIMMONS  
P.O. BOX 4272  
KEY WEST, FL 33041

SUBJECT: ISLAND RENTALS INC.  
Ref. Number: W04000023609

We have received your document for ISLAND RENTALS INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

**Adding "of Florida" or "Florida" to the end of a name is not acceptable.**

The document must state the number of shares of authorized stock.

Please complete article VI with the persons name.,

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6925.

Cynthia Blalock  
Document Specialist  
New Filings Section

Letter Number: 504A00040747

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

FILED

04 JUN 29 PM 3:51

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE I NAME**

The name of the corporation shall be:

Island Rentals Key West Inc.

Mailing Address

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailing address is:

2146 Palm Beach Rd.  
Big Pine Key, FL 33043

P.O. Box 4272  
Key West, FL 33041

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Rental of equipment / wheelchairs + baby strollers

**ARTICLE IV SHARES**

The number of shares of stock is:

one

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

List name(s), address(es) and specific title(s):

Maureen Fitzsimmons  
(Address same as above)

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address of the registered agent is:

2146 Palm Beach Rd.  
Big Pine Key, FL 33043

Maureen Fitzsimmons

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Maureen Fitzsimmons  
P.O. Box 4272  
Key West, FL 33041

\*\*\*\*\*  
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Maureen Fitzsimmons

Signature/Registered Agent

Maureen Fitzsimmons

6/14/04

Date

Maureen Fitz

Signature/Incorporator

Maureen Fitzsimmons

6/14/04

Date