

P04000108991

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

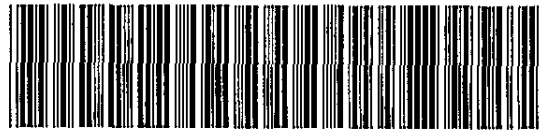
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*[Signature]* 7/23/✓



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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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2004

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**CT CORPORATION**

July 23, 2004

Department of State, Florida  
409 East Gaines Street  
Tallahassee FL 32399

Re: Order #: 6154035 SO  
Customer Reference 1:  
Customer Reference 2:

Dear Department of State, Florida:

Please file the attached:

OrlandoBeachVacations, Inc. (FL)  
Incorporation  
Florida

Enclosed please find a check for the requisite fees. Please return evidence of filing(s) to my attention.

If for any reason the enclosed cannot be filed upon receipt, please contact me immediately at (850) 222-1092. Thank you very much for your help.

Sincerely,

Connie R Bryan  
Manager Fulfill Ctr  
Connie\_Bryan@cch-lis.com

660 East Jefferson Street  
Tallahassee, FL 32301  
Tel 850 222 1092  
Fax 850 222 7615

**ARTICLES OF INCORPORATION**

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

**ARTICLE I NAME**

The name of the corporation shall be:

OrlandoBeachVacations, Inc.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/ mailing address is:

710 N. Plankinton Avenue, Suite 1200  
Milwaukee, WI 53203

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Timeshare marketing and for all related lawful business purposes.

**ARTICLE IV SHARES**

The number of shares of stock is:

100

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

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

To be determined.

**ARTICLE VI REGISTERED AGENT**

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

C T Corporation System  
c/o C T Corporation System  
1200 South Pine Island Road  
Plantation, Florida 33324

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

James B. Young  
710 N. Plankinton Avenue, Suite 1200  
Milwaukee, WI 53203

\*\*\*\*\*  
*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*

**CONNIE BRYAN**  
**SPECIAL ASSISTANT SECRETARY**

Signature/Registered Agent

07/23/2004

Date

Signature/Incorporator

07/22/2004

Date

**FILED**  
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA