

P96000014859

CAPITAL CONNECTION, INC.

417 E. Virginia St., Suite 10349, Tallahassee, FL 32301, (904)224-8870
 Mailing Address: Post Office Box 10349, Tallahassee, FL 32302
 TOLL FREE No. 1-800-342-8062
 FAX (904) 222-1222

No. 52280

RE: The Bike Theft of
Key West Zog FIDNS PH 2-11

NAME _____
 FIRM _____
 ADDRESS _____

PHONE () _____

Service: Top Priority _____ Regular _____
 One Day Service Two Day Service

To us via _____ Return via _____

Matter No.: _____ Express Mail No. _____

State Fee \$ _____ Our \$ _____

PH 2/16/96

REQUEST	TAKEN	CONFIRMED	APPROVED
DATE _____	_____	_____	_____
TIME _____	<i>PC</i>	_____	CK No. _____
BY _____	<i>PC</i>	_____	_____

WALK-IN Will Pick Up 2/16 1:00

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

- Original Express™
- Art. of Inc. Filing _____
- _____ Corp. Record Search _____
- _____ Ltd. Partnership Filing _____
- _____ Foreign Corp. Filing _____
- () Cert. Copy(ies) _____
- _____ Art. of Amend. Filing _____
- _____ Dissolution/Withdrawal _____
- _____ C U S - 60000171 7126
-02/16/96--01054--018
- _____ Fictitious Name Filing ****122.50 ****122.50
- _____ Name Reservation _____
- _____ Annual Report/Restatement _____
- _____ Reg. Agent Service _____
- _____ Document Filing _____
- _____ Corporate K11 _____
- _____ Vehicle Search _____
- _____ Driving Record _____
- _____ Document Retrieval _____
- _____ UCC 1 or 3 Filing _____
- _____ UCC 11 Search _____
- _____ UCC 11 Retrieval _____
- _____ File No.'s, _____ Copies _____
- _____ Courier Service _____
- _____ Shipping/Handling _____
- _____ Phone () _____
- _____ Top Priority _____
- _____ Express Mail Prep. _____
- _____ FAX () _____ pgs.

RECEIVED
 DIVISION OF CORPORATION
 FEB 16 AM 11:44

SUBTOTALS	
FEE.....	\$ _____
DISBURSED.....	\$ _____
SURCHARGE.....	\$ _____
TAX on corporate supplies.....	\$ _____
SUBTOTAL.....	\$ _____
PREPAID.....	\$ _____
BALANCE DUE.....	\$ _____
_____	\$ _____

Please remit invoice number with payment
 TERMS: NET 10 DAYS FROM INVOICE DATE
 1 1/2% per month on Past Due Amounts
 Past 30 Days, 18% per Annum.

THANK YOU
 from
 Your Capital Connection

TRANSMITTAL LETTER

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

SUBJECT: The Bike Tour of Key West 2, Inc.
Proposed Corporate Name

Enclosed is an original and one copy of the Articles of Incorporation, a designation of registered agent, and a check for \$70.00. Please return one copy of the Articles stamped with the filing date.

FROM:

D.O. Christian Rieger

Name (print or type)

306 Elizabeth

Address

Key West, FL 33040

City, State, Zip

305 - 296 - 5723

Area Code and Phone Number (Daytime)

FILED

ARTICLES OF INCORPORATION
OF

96 FEB 16 PM 2:11

The Bike Tour of Key West
(Name of Corporation)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

ARTICLE 1: NAME

The name of the corporation shall be: The Bike Tour of Key West Z, Inc.

ARTICLE 2: PRINCIPAL PLACE OF BUSINESS

The principal place of business of this corporation shall be (give street address and zip code): 306 Elizabeth, 3 rear, Key West, FL 33040

ARTICLE 3: SHARES

All stock issued by this Corporation shall be common voting stock of a single class. The number of shares of stock that this corporation is authorized to have outstanding at any time is: 500

ARTICLE 4: INITIAL REGISTERED AGENT AND REGISTERED OFFICE

The name of the initial registered agent is D.O. Christian Rieger
306 Elizabeth, Key West FL 33040
whose registered office is located at the place of business stated in Article 2 above.

ARTICLE 5: INCORPORATOR

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

D.O. Christian Rieger
306 Elizabeth
Key West, FL 33040

The undersigned incorporator has executed these Articles of Incorporation this _____
Day of February 1996.

D.O. Christian Rieger
Signature

Articles of Incorporation
Filing Fee — \$35.00

FILED

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE
STATE OF FLORIDA
TALLAHASSEE, FLORIDA

FEB 16 PM 2:11

Pursuant to Florida law, 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/professional association is:
The Bike Tour at Key West 2, Inc.

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

D.O. Christian Rieger
Full name

306 Elizabeth
Address (P.O. Box not acceptable)

Key West, FL 33040
City, State, and Zip

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.

D.O. Christian Rieger
SIGNATURE OF REGISTERED AGENT

February 15, 1996
DATE

Designation of Registered Agent
Filing Fee — \$35.00