TRANSMITTAL LETTER

P01000070631

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

SUBJECT: VACATION VILLAS, INC.
(Proposed corporate name - must include suffix)

000004478410--6
-07/16/01--01128--012
*****78.75 *****78.75

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: V. Balletto & Associates, Inc.
Name (Printed or typed)

3956 Town Center Blvd., #165
Address

Orlando, FL 32837
City, State & Zip

407-248-9877
Daytime Telephone number

FILED
01 JUL 16 PM 12:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

7/18

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.

FILED
01 JUL 16 PM 12:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

VACATION VILLAS, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business of this corporation shall be:

7913 MAGNOLIA BEND COURT
KISSIMMEE, FL 34787

and the mailing address of this corporation shall be:

109 QUEEN STREET
PETERHEAD
ABDERDEENSHIRE
AB42 1UA
SCOTLAND, UNITED KINGDOM

ARTICLE III SHARES

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

100

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

JOHN STEPHEN
7913 MAGNOLIA BEND COURT
KISSIMMEE, FL 34787

ARTICLE V INCORPORATOR(S)

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

JOHN STEPHEN
7913 MAGNOLIA BEND COURT
KISSIMMEE, FL 34787

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this **12th** day of **JULY, 2001**.

J. Stephen

Signature

Signature

Signature

NOTARIZATION IS NOT REQUIRED

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, 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.

FILED
01 JUL 16 PM 12:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. The name of the corporation is: **VACATION VILLAS, INC.**

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

JOHN STEPHEN
(NAME)

7913 MAGNOLIA BEND COURT
(P.O. Box or Mail Drop Box **NOT** Acceptable)

KISSIMMEE, FL 34787
(City/State/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 property and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

J. Stephen

(Signature)

JULY 12, 2001
(Date)

DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314