



Travel Planners Inc.

146 S. STATE STREET • SUITE A • DOVER, DE 19901
800-358-4688 • 302-674-4302 • 302-674-4303 Fax • WWW.TRAVEL727.COM
904-727-7372

April 2, 2002

Attn: ARC

I was to move and open my office in South Daytona Beach effective December 2001. Due to the tragedy of 9/11 I had to get out of my lease and lay off most of my employees. On 3/15, I had to move to Jacksonville temporarily until I was able to determine what I was going to do about my business.

Effective 4/18 I will be located at: (PERMANENT Address - will be working from my home no longer a walk in establishment) Will only keep my most profitable accounts. Bank will remain the same in Dover Delaware.

ARC 08 63823 2 *Marianne Syverson*

Travel Planners Inc. AUTHORIZED BY: *TO*
3455 Sunset Ave
P.O. Box 477
Scottsmeer, FL 32775
321-264-0180
321-264-2792-fax
800-358-4688

CORRECT *d/b/a resolution - add line.*

8/23/02

DOC. EXAM

let

400005312834--0
-04/22/02--01047--011
*****78.75 *****78.75

I am in the process of getting my Florida occupational license. And I have also gotten a rider with my bond for the new location.

Please make the necessary changes so that I can continue with my ARC accreditation. Please advise of what else I may need to complete this process.

Thank you for your assistance in this matter..

Marianne Syverson
Marianne Syverson
Pres. & CEO

5/10 @ 2:06 PM
O.K. per *Nannette*

Signed doc under #11 1st pg

W02-11956
J. BRYAN APR 26 2002

J. BRYAN AUG 23 2002



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

May 10, 2002

MARIEANNE SYVERSON
PO BOX 477
SCOTTSMOOR, FL 32775

SUBJECT: TRAVEL PLANNERS INC.
Ref. Number: W02000011956

FILED
2002 AUG 23 PM 2:34
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

Please accept our apology for failing to mention this in our previous letter.

The name designated in your document is not available. Therefore, the corporation must adopt an alternate name for use in the state of Florida. To adopt an alternate name the corporation must submit a corporate resolution by the board of directors adopting the alternate name for use in the state of Florida. Please note the corporate resolution must be signed by the chairman, vice chairman, or an officer of the corporation. The alternate name must contain a corporate suffix. Such suffixes include: Corporation, Corp., Incorporated, Inc., Company, and CO.

Please RETURN ALL DOCUMENTATION to the ATTENTION of the DOCUMENT SPECIALIST indicated.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Joey Bryan
Document Specialist

Letter Number: 102A00029794



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

April 26, 2002

MARIEANNE SYVERSON
PO BOX 477
SCOTTSMOOR, FL 32775

SUBJECT: TRAVEL PLANNERS INC.
Ref. Number: W02000011956

FILED
2002 AUG 23 PM 2:34
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

We have received your document for TRAVEL PLANNERS INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The entity's period of duration must be listed on the application. Please insert the word "perpetual", if a specific date of dissolution or term of existence has not been specified.

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

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) 245-6043.

Joey Bryan
Document Specialist
Tax Liens

Letter Number: 502A00025563

*Thank You,
Please Type*

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: TRAVEL PLANNERS INC
(Name of corporation - must include suffix)

FILED
2002 AUG 23 PM 2:34
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

MARIEANNE SYVERSON

(Name of Person)

TRAVEL PLANNERS INC.

(Firm/Company)

P.O. BOX 477 - 3455 SUNSET AVE

(Address)

SCOTTS MOOR FL 32775

(City/State and Zip code)

For further information concerning this matter, please call:

Marieanne Syverson
(Name of Person)

at (904) 727-7372
(Area Code & Daytime Telephone Number)

STREET ADDRESS:

Registration Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- ☐ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & Certificate of Status ☐ \$78.75 Filing Fee & Certified Copy ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

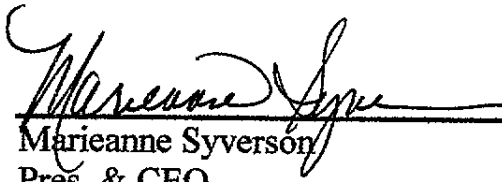
August 20, 2002

Special Meeting with Board of Directors

RE: Resolution By Board of Directors regarding Travel Planners Inc.

Whereas, the name Travel Planners Inc is not available in Florida.

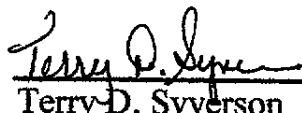
Resolved, Travel Planners Inc. should conduct business in the state of Florida as Travel with Marieanne Inc.


Marieanne Syverson

Pres. & CEO

Chairman of the Board

8/20/02
Date


Terry D. Syverson
Secretary

8/20/02
Date

FILED
2002 AUG 23 PM 2:34
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. TRAVEL PLANNERS INC.

(Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)

2. Pennsylvania

(State or country under the law of which it is incorporated)

3. 25 1824 828

(FEI number, if applicable)

4. 12/17/98

(Date of incorporation)

5. perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. 4/28/02

(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.")

(SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)

7. 3455 Sunset Ave - P.O. Box 477 - SCOTTS MOOR FL 32775

(Principal office address)

P.O. Box 477 - SCOTTS MOOR FL 32775 - 0477

(Current mailing address)

8. SELL travel to corporate clients (restricted access)

(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)

Name: Brent Sylverson

Office Address: 3465 Sunset Ave

SCOTTS MOOR FL

(City)

, Florida 32775

(Zip code)

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Brent Sylverson

(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

Marianne Sylverson
Pres & CEO 5/6/02

FILED
2002 AUG 23 PM 2:34
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

FILED
2002 AUG 23 PM 2:34
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

B. OFFICERS

President: Marianne Syverson

Address: P.O. Box 477

SCOTTSBORO FL 32775-0477

Vice President: _____

Address: _____

Secretary: SAME

Address: _____

Treasurer: SAME

Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. _____

(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. _____

(Typed or printed name and capacity of person signing application)

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF STATE

AUGUST 10, 2001

FILED
2002 AUG 23 PM 2:34
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

TRAVEL PLANNERS INC.

is duly incorporated under the laws of the Commonwealth of Pennsylvania
and remains a subsisting corporation so far as the records of this office
show, as of the date herein.



IN TESTIMONY WHEREOF, I have
hereunto set my hand and caused
the Seal of the Secretary's
Office to be affixed, the day
and year above written.

Kim Ditzgen

Secretary of the Commonwealth

JSOW