# F95000004823

	Qualification/Tax Lien Section Division of Corporations	80:00015933018 -09/20/9501030017 ++++70.00 ++***70.00
SUBJE	CT: PARADISE FOUND, INC  (Name of corporation - must include suffix)	W95-19293
Dear Si	r or Madam:	·
The end Florida' foreign	closed "Application by Foreign Corporation for Authorization to Tr ", "Certificate of Existence", and check are submitted to register the corporation to transact business in Florida.	ransact Business in above referenced
Please r	return all correspondence concerning this matter to the following:	
	CITRIS F. PARKER (Name of Person)	
	(Name of Person)	25 Se
	PARADISE FOUND, INC.	Sex
	(Firm/Company)	8
	101 CAECCENT AND, SUITE	25 26 28 3 6.13 2 24 5. 15.15.15.15.15.15.15.15.15.15.15.15.15.1
	LOUISVILLE KENTUCKY 40.	206
Should y	you need to call someone concerning this matter, please call:	
	(Name of Person) at (502 (Area Code & Da	) 893-2100 vtime Telephone Number)

#### **COURIER ADDRESS:**

Qualification/Tax Lien Sec. Division of Corporations 409 E. Gaines St Tallahassee, FL 32399

#### **MAILING ADDRESS:**

Qualification/Tax Lien Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314



#### FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

Backdale

September 26, 1995

CHRIS F. PARKER PARADISE FOUND, INC. 101 CRESCENT AVE #C LOUISVILLE, KY 40206

SUBJECT: PARADISE FOUND, INC.

Ref. Number: W95000019293

We have received your document for PARADISE FOUND, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

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.

Please return 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 (904) 487-6094.

Doug Dickinson Document Specialist

Letter Number: 195A00043939

## RESOLUTION OF BOARD OF DIRECTORS

I, the undersig	ned Chris F. Parker	, do hereby certify
that this Resol	ution of the Board of Directors ofParadise	Found, Inc.
a corporation o	uly organized and existing under the laws of the Sta	te of Kentucky
was duly adop	oted on October 2 , 19 95 .	
Reso	olved, thatParadise Found, Inc.	, organized \\ \frac{\fin}}}}}}}}{\frac{\fir}}}}}}{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\fir}{\fir}}}}}}}{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\fir}}}}}}}}{\frac{\frac{\frac{\frac{\frac{\fir}}}}}}{\frac
	existing in the State of Kentucky	
	neParadise Key West, Inc.	
Dated:/6	/3/95 Ch 74	El Prendit + CER
	Signature o	f at least one director

### 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.	PARADISE FOU	رے لدر رہ				
	PARADISE FOU (Name of corporation: must include the word "INCORPOR abbreviations of like import in language as will clearly indic person or partnership if not so contained in the name at pre	ATED", "COMPAN rate that it is a corpor sent.)	Y", "CORPORATION" ation instead of a natural	or words	or	
2.	KENTUCKY State or country under the law of which it is incorporated)	3	61.12874 FEI number, if applicab	188		
`	- The second sec	(	. P.E.I (tumber, it applicat	(c)		
4.	8.16-95 (Date of Incorporation)	5	PERPETVA	4		
	(Date of incorporation)	(Duration: Year c	orp, will cease to exist o	r "perpetu	ai")	
6.	(Date first transacted business in Florida. (SEE SECTIONS	95				
	(Date hist transacted outmess in Piorida, (SEE SECTION)	s 607.1501, 607.150	2, AND 817.155, F.S.)			
7.	101 CRESCENT A	VE , SVIT	EC			
	LOVISVILLE, KY. 40206					
	(Current mailin	g address)		<del></del>		
8.	PROVIDING TRAVEL S	ERVICES	FOR THE D	15AB	≀ <i>e</i> i⊃	
9	Purpose(s) of corporation authorized in home state or countrilorida)	y to be carried out in	the state of			
Current mailing address)  8. PROVIDING TRAVEL SERVICES FOR THE DISABLED (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)  9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)  Name: MARY KIRP McDANIEL  Office Address: 720 DUVAL ST. H3 REPLA  KEY WEST , Florida, 33040  (Zip Code)						
	Name: MARY KIPP Mc DA	WIEL		ř	27.5	
Off	ice Address: 720 DVVAL ST. A	3 REAR		11. 9.		
	KEY WEST	, Florida ,	33040	4	SHG.	
10.	Registered agent's acceptance:	(2	Zip Code)			
Ha cor	ving been named as registered agent and to accept poration at the place designated in this application is tered agent and agree to act in this capacity. It is tatutes relative to the proper and complete performance of the obligations of my position as registered agent.  (Registered agent)	mance of my au	ess for the above sto pt the appointment o comply with the pro ties, and I am famil	ited is visions o iar with	of	
	(Registered agent	's signature)				
11.	Attached is a certificate of existence duly authent delivery of this application to the Department of Sofficial having custody of corporate records in the incorporated.	icated not more	than 90 days prior t etary of State or oth er the law of which i	o ier it is		

incorporated.

12. Names and addresses of officers and/or directors: (Street address ONLY- P. O. Box NOT acceptable) A. DIRECTORS (Street address only- P. O . Box NOT acceptable) CHRIS F. PARILOR Chairman: 1914 DOROTHI AVE LOVISJILLE, KY 40205 Address: Vice Chairman:\_\_\_ Address: CAROLINE B PARILIE Director: DUNOTHY AVE Address: \_\_\_ 40205 LOUISVILLE PARKER SP. Director: Address: \_\_\_\_ LOUISVILLE , KY. 40205 B. OFFICERS (Street address only- P. O. Box NOT acceptable) President: CHRIS F. PARKER 1916 DOROTHY ANS Address: \_\_\_\_\_ LOVISHILLE, KY 40205 EXEC. Vice President: CAROLINE B. PARUER 1916 DORUTHY ANE Address: \_\_\_\_ , Ky 40205 Secretary: D. ELIZABETH DISTLER CHAOWICK Address: 1001SUICE JoHN Treasurer: DORDTHY AVE Address: \_ NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

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

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



OFFICE OF THE SECRETARY OF STATE

# CERTIFICATE OF EXISTENCE DOMESTIC CORPORATION

I, BOB BABBAGE, Secretary of State of the Commonwealth of Kentucky, do hereby certify, that according to the records in the office of the Secretary of State of the Commonwealth of Kentucky, PARADISE FOUND, INC.
is a corporation organized and existing under the laws of the Commonwealth of Kentucky, whose date of incorporation isAUGUST_16, 1995 ;
and whose period of duration isPERPETUAL
I further certify, that said corporation has paid all fees due and owing to the office of the Secretary of State of the Commonwealth of Kentucky to date; has delivered to the Secretary of State its most recent annual report, as required by KRS 271B.16-220 or 273.3671; and has not filed articles of dissolution.
IN WITNESS WHEREOF, I have hereunto set my hand and affixed my Official Seal, at Frankfort, Kentucky, this <u>28TH</u> day of <u>AUGUST</u> , 19 <u>95</u> .

BOB BABBAGE Secretary of State

Commonwealth of Kentucky

JSG

1	1500000	4877
	Requestor's Name	rows
Par	RADISE FOUND, INC.	
• 101	CRESCENT AVE. SHITE C	
Lou	JISVILLE, KENTUCKY 40208	
• • • • • • • • • • • • • • • • • • •		
City	y/State/Zip Phone #	
		Office Lies C. I
CORPORA'	TION NAME(S) & DOCUMENT	Office Use Only
	TION NAME(S) & DOCUMENT NUM	BER(S), (if known):
1.		•
1	(Corporation Name)	
2	(Doc	cument #)
<u>-</u>	(Corporation Name)	
3.	(Doc	ument #)
J	(Corporation Name) (Dec	
4	(Doc	Iment #)
4	(Corporation Name)	
	(Docu	ment #)
Walk in	<b>D</b>	
<u> </u>	Pick up time	Certified Copy
Mail out	Will wait Photocopy	· ·
NEW FILINGS		Certificate of Status
NEW FILINGS	AMENDMENTS	
Profit	Amendment	900000
NonProfit		9000022552492
Limited Liability	Resignation of R.A., Officer/ Director	*****35.00 *****35.80
Domestication	Change of Registered Agent	
	Dissolution/Withdrawal	7
Other	Merger	
	at Comment	
OTHER FILINGS	REGISTRATION/	
Annual Report	QUALIFICATION	
Fictitious Name	Foreign	Ia

OTHER FILINGS
 Annual Report
 Fictitious Name
 Name Reservation

	麗麗	REGISTRATION/ QUALIFICATION
		Foreign
		Limited Partnership
1		Reinstatement
L	_	Trademark
L		Other

	,		C	
PARADISE KEY WE	ST PNC.			DIVION 97
	(Name of Corporatio	n)		
KENTUCKY				55-
(Inc	corporated Under Law	5 Of)		<del></del>
				====
is corporation is no longer transposing				?:

This corporation is no longer transacting business or conducting affairs within the State of Florida and hereby voluntarily surrenders its authority to transact business or conduct affairs in Florida.

This corporation revokes the authority of its registered agent in Florida to accept service on its behalf and appoints the Department of State as its agent for service of process based on a cause of action arising during the time it was authorized to transact business or conduct affairs in Florida.

The following is a current mailing address to which the Department of State may mail a copy of any process against this corporation that may be served on the Department.

10   CRESCIENT HUE (Mailing Address)	
LOUISUILLE, KY. 40206 (City/ State/Zip)	

The corporation agrees to notify the Department of State in the future of any change in its mailing address.

Signature CFO

Signature Title

Tother F. Parrecer 7/29/97

Typed or printed name Date

TEL# 502 8956011