

TRANSMITTAL LETTER

P 00000024922

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

FILED  
00 MAR - 6 AM 11:50  
DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

SUBJECT: Scenic TRAVEL INC.

(Proposed corporate name - must include suffix)

900003158379--3  
-03/06/00--01102--007  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

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: ERIC M<sup>C</sup>CAUGHWA  
Name (Printed or typed)

PO Box 4782  
Address

Seminole FL. 33775  
City, State & Zip

727-393-0110  
Daytime Telephone number

~~RECEIVED~~ MAR 1 0 2000

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

## ARTICLES OF INCORPORATION

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

### ARTICLE I      NAME

The name of the corporation shall be: Scenic TRAVel INC.

### ARTICLE II      PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

P.O. Box 4782 Seminole FL. 33775

### 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 Florida street address of the initial registered agent are:

ERIC MCCAUGHNA 8263 132 ST. N. Seminole FL.  
33776

### ARTICLE V      INCORPORATOR

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

ERIC MCCAUGHNA 8263 132 ST. N. Seminole FL.  
33776

  
\_\_\_\_\_  
Signature/Incorporator

3/3/00  
\_\_\_\_\_  
Date

(An additional article must be added if an effective date is requested.)

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

  
\_\_\_\_\_  
Signature/Registered Agent

3/3/00  
\_\_\_\_\_  
Date

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00 MAR -6 AM 11:50  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA