## PH 300000007

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

SUBJECT: THE TIME & PLACE TRAVEL Co.  (Proposed corporate name - must include suffix)  60000316305603/09/0001005004  ******87.58 ******87.58			
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  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED
FROM: CAROLYN STIEH CAWTHON  Name (Printed or typed)			
	RIVERVIEW, FL	Address	FILED  00 MAR -9 PM 2  SECRETARY OF ST TALLAHASSEE, FLO



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.

## <u>ARTICLE I NAME</u>

The name of the corporation shall be:

THE TIME & PLACE TRAVEL CO.

ARTICLE II PRINCIPAL OFFICE

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

9105 HIDDEN WATER CIRCLE

RIVERVIEW FL 33569

ARTICLE III SHARES

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

## ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

CAROLYN S. CANTHON 9105 HIDDEN WATER CIPCLE RIVERVIEW FL 33569

ARTICLE V INCORPORATOR

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

CAROLYN S. CAWTHON 9105 HIDDEN WATER CIRCLE

RIVERVIEW PL 33569

Signature/Incorporator

6 MARCH 2000

(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

6 MARCH ZOOD

Date