

FILED

00 MAR 15 AM 9: 30

SECRETARY OF STATE TALLAHASSEE, FLORIDA

\*\*\*\*87.50

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

SUBJECT:	VINNY'S Get	away INC rate name - refust include suf	fix)	
		,	50000317 -03/15/00- *****87.5	12 -010 0 *
Enclosed is an origin	nal and one(1) copy of the article	es 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: I/a Nell Helton Name (Printed or typed)				
	729 NS	SR 21	· · ·	
	Melrose, F	EL 32666 State & Zip	·	
	(352) 3	72-6603		

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

3/22/2000/

## ARTICLES OF INCORPORATION

FILED

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

00 MAR 15 AM 9: 30

ARTICLE I

The name of the corporation shall be: VINNY'S Getaway INC.

SECRETARY OF STATE TALLAHASSEE, FLORIDA

Place of

PRINCIPAL OFFICE ARTICLE II

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

- 14948 N. MAIN ST. Alachva, FL 32615 Mailing Address:

729 N SR 21

Melrose, FL 32666

ARTICLE III SHARES

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

1000 Shares

INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Keith W. Miller 729 N SR 21 Me Irose, FL 32666

ARTICLE V *INCORPORATOR* 

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

IRA NELL Helton

729 N 5R Z1 658, FL 32666

(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