TRANSMITTAL LETTER

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

SUBJECT:	KEY WEST VI // AS RESORT INC. (Proposed corporate name - must include suffix)	
	100003 -03/2	1857013 7/0001126007

Enclosed is an original and one (1) copy of the articles of incorporation and a check for:

□ \$	70.00	
	-	

□ \$78.75

Filing Fee Filing Fee & Certificate of Status

\$78.75

\$87.50

Filing Fee

Filing Fee,

& Certified Copy

Certified Copy

& Certificate of

Status

ADDITIONAL COPY REQUIRED

FROM: 5ABATIND J. MARMORA Name (Printed or typed)	; ; ; ; <u>; ; ; ; ; ; ; ; ; ; ; ; ; ; ; </u>
921 CENTER ST Address	TMAR V - L. AT
KEY WEST FL 33040 City, State & Zip	* : · · · · ·
305 292-6900 Daytime Telephone number	er er og er og er og er

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

ARTICLES OF INCORPORATION	
In compliance with Chapter 607 and/or Chapter 621, F.S.	. (Profit)
ARTICLE I NAME	man de la composição de l En entre
The name of the corporation shall be:	
KEY WEST VILLAS RES	ORT, INC.
ARTICLE II PRINCIPAL OFFICE	·, ··
The principal place of business/mailing address is:	Q 22 3 4
921 CENTER ST #	
KEY WEST PL 33	040
ARTICLE III PURPOSE	
The purpose for which the corporation is organized is:	E.S.
A FOR PROPOT CORPOR	PATION
ARTICLE IV SHARES	,
The number of shares of stock is: /00	NO SECTION OF THE SEC
ARTICLE VI REGISTERED AGENT The name and Florida street address registered agent as	LORUD PRES/ PIRETAR 67#8 Key WEST PL 33040 TIMERS / DIRECTOR TRUMON AIR # 2 Key WIST PL 33040
ARTICLE VII INCORPORATOR	neg vitis i o o o o o o o o o o o o o o o o o o
The name and address of the Incornerator are:	ren en e
MICharl. M. CORDU	Persont 1
921 CENTER ST	#8 Key Wos TPL 33040

Having been named as registered agent and to accept service of pro	ocess 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 pe	erformance of my auties, and I am familiar with and accept the
obligations of my position as registered agent.	2/42/
(John Meer	3/23/00
Signature/Registered Agent	Date
/ W// In/	3/23/00
Signature/Incorporator	Date

Signature/Incorporator