

TRANSMITTAL LETTER

P00000044005

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

300003233753--4
-05/01/00--01146--012
*****70.00 *****70.00

SUBJECT: International Travel Directors Association, Inc.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

300003233753--4
-05/01/00--01146--012
*****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: Nita Sullivan
Name (Printed or typed)

5303 Blackburn Court
Address

Oviedo, Florida 32765
City, State & Zip

(407) 671-0393
Daytime Telephone number

FILED
MAY -1 PM 2:28
TALLAHASSEE FLORIDA

S. Thompson MAY 02 2000

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

The name of the corporation shall be:

International Travel Directors Association, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

5303 Blackburn Court
Oviedo, Florida 32765

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To provide staffing needs for clients and to provide membership opportunities
for travel staff

ARTICLE IV SHARES

The number of shares of stock is:

1000

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

Larry L. Popp
625 Palmer St.
Orlando, Florida 32801

Nita Sullivan
5303 Blackburn Court
Oviedo, Florida 32765

ARTICLE VI REGISTERED AGENT

The name and Florida street address registered agent is:

Nita Sullivan
5303 Blackburn Court
Oviedo, FL 32765

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Nita Sullivan
5303 Blackburn Court
Oviedo, FL 32765

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Nita Sullivan
Signature/Registered Agent

4-26-00
Date

Nita Sullivan
Signature/Incorporator

4-26-00
Date

FILED
00 MAY - 1 PM 2:28
SECRETARY OF STATE
TALLAHASSEE FLORIDA