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

900003234749--5 -05/02/00--01003--015 \*\*\*\*\*78.75 \*\*\*\*\*78.75

ORLANDO VA CATION HOMES, INC. (PROPOSED CORPORATE NAME-MUST INCLUDE SUFFIX)

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

■ \$87.50

Filing Fee

Filing Fee,

& Certified Copy

Certified Copy

& Certificate of

Status

ADDITIONAL COPY REQUIRED

FROM: FELNANDO ALTAMIRANO

Name (Printed or typed)

2845 WOODRUFF DR.

Address

OR 2 And DO., Fl. 32837

City, State & Zip

(407) 851-1457

Daytime Telephone number

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:	- 8 A
ORLANDO VACATION H	ONES, INC.
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is:	
2845 WOODRUFF DR. ORLANDO, FL. 32837	
ARTICLE III PURPOSE  The purpose for which the corporation is organized is	·
SHORT TERM RENTAL	HOMES
ARTICLE IV SHARES The number of shares of stock is:	<b>-</b>
/OO STOCK 5  ARTICLE V INITIAL OFFICERS/DIRECTORS The name(s) and address(es):	S (optional)
ARTICLE VI REGISTERED AGENT  The name and Florida street address of the registered	agent is:
FERNANDO ALTANIRAND	
2845 WOODRUFF DR. ORLANDO, Fl. 32837	
ARTICLE VII INCORPORATOR The name and address of the Incorporator is:	<del>-</del>
FERNANDO ALTANIRANO	
2845 WOODRUFF DR	
OD1 ANDO. EL 21827	

FALTONIADIO D		4-26-00
Signature/Registered Agent	-	Date
Signature/Incorporator	- · · · · · · · · · · · · · · · · · · ·	