Page 44775

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

SUBJECT:

400003233914--1 -05/02/00--01004--002 ****157.50 ******78.75

Enclos	sed is an origina	al and one(1) copy of the artic	les of incorporation and a	a check for :	Ī				
	□ \$70.00	□ \$78.75	\$78.75	□ \$87.50					
	Filing Fee	Filing Fee & Certificate of Status	Filing Fee & Certified Copy	Filing Fee, Certified Copy & Certificate of Status					
			ADDITIONAL CO	00					
	FROM: Andres Novo Capefillo Name (Printed or typed) P. D. Box 680597 Address								
		P. D. 1004 680597 Address MIAMI, Fh. 33/68 - 0597 City, State & Zip							
	②のマー フラスームラリー Daytime Telephone number								
		305-688-4408		W-116	5 ⁶				

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

War



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

May 3, 2000

ANDRES NOVO CAPETILLO PO BOX 680597 MIAMI, FL 33168-0597

SUBJECT: TIMESHARE CLINIC INC.

Ref. Number: W00000011636

We have received your document on Timeshare Clinic Inc. However, there are corrections that need to be made to the document. Please call me at the telephone number below. I will retain your document in my pending file until your call.

The registered agent must have a Florida street address. A post office box, personal mail box (PMB), or mail drop-box address is not acceptable.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6923.

RoseAnn Varnadore Corporate Specialist Supervisor

Letter Number: 800A00024632

In compliance with Chapter 607 and/or Chapter 6	521, F.S. (Pro	ofit)				
ARTICLE I NAME		; -		SEC TALI	00	
The name of the corporation shall be:				<u></u>	MMY	
· · · · · · · · · · · · · · · · · · ·	·			芸	=<	1
THESHARE	CHIN	10 1	nci		5	
ARTICLE II PRINCIPAL OFFICE	_				PM	Ö
The principal place of business/mailing address is:				92	ယ	
P.O. BOX 6000	197	>		P A	49	
MIAUI, IL	7/00					
ARTICLE III PURDOCE						
The purpose for which the corporation is organize estant owner ASSISTANCE, I ARTICLE IV SHARES	ed is:	~ <i>E</i> < 6	20 WF 121	1 COMIOUS	terc	-
MANGE AND COTOLURAD	- MILL	ation	OAL	242	PI	01
OFA	11-6	ind S		•		
ARTICLE IV SHARES	71 / /	70 0				
The number of shares of stock is:	·		- +			,
500 T	, <u>-</u>	-				
	ODO (*					
ARTICLE V INITIAL OFFICERS/DIRECTO	UKS (option	nal)				
MARINEL GON	ZMhe	2				
The name(s) and address(es): HARIVEL GON ANDRES NON	0 04	peti	110			
ARTICLE VI REGISTERED AGENT	-					
The name and Florida street address of the registe	ered agent is:					
	-					
Kegister Mariyal	ed Agent					
850 NW	Gonzalez 1225T					
N. Miam	i, Fl 33168					
MATICLE VII INCORPORATOR	3 .					
The name and address of the Incorporator is:	10-					
MARINEL CONZA	hez On -a	-7	-	-		
P.O. Boy 60	000	5				
MINMI, FC	11/48					
**************************************	******	*******	*****	******	*****	*
Having been named as registered agent to accept service of proceedings of the appointment as the service of proceedings of the proceedings of the service of of	rocess for the a	bove stated c	orporation at ti	he place designa	ted in th	is
M n	egisiereu ageni	ana agree to	act in this cape	acity /		
11 Deemel Sonorler			1 1/1	7/200		
Signature/Registered Agent/ Incorporator	<u> </u>		Date/	10000		
			Day	1		