## P0000086274

## TRANSMITTAL LETTER

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

-000003389030--2 -09/11/00--01141--008 \*\*\*\*\*87.50 \*\*\*\*\*\*87.50

SUBJECT:	VACATIONNETICOM CORO. INC. (PROPOSED CORPORATE NAME-MUST INCLUDE SUFFIX)				
\$70.00	nal and one(1) copy of the articl	□ \$78.75	\$87.50	7	
Filing Fee	Filing Fee & Certificate of Status	Filing Fee & Certified Copy  ADDITIONAL CO	Filing Fee, Certified Copy & Certificate Status PPY REQUIRED	of	
FROM	: Howard L Name (P	KAPLAN rinted or typed)			
	441 Wood Ros	2 LANY		00 SE	
	Altamonto Spara	N/S FL 3271 State & Zip	<u>\</u>	ARY OF S	
	407 - 774 -	- 15 G G		2: 5:5 ORIDA	

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

John Marie

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:	TAL SE(
VACATIONNEL. COM, INC.	FILED  SEP II PM 2: I  CRETARY OF STAT  LAHASSEE, FLORE
ARTICLE II PRINCIPAL OFFICE	SSE = G
The principal place of business/mailing address is:	
441 Wood Rose Lane	LOI 23
Altamonte Springs, FC 32714	NDA TE
ARTICLE III PURPOSE	
The purpose for which the corporation is organized is:	
ARTICLE IV SHARES The number of shares of stock is:	
100	
ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)	
The name(s) and address(es):	
4 DOVOY 1	
ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is:	**
Acres of the colons	
HOWARD L KAPLAN 441 Wood Rose Lane	
APTICIEVIL INCOPPORATOR	
ARTICLE VII INCORPORATOR	
The name and address of the Incorporator is:	
HOWARD L. KAPLAN YUI Wood ROSE LANG	
Altamonte Spains 1, RC 32714	
**************************************	
certificate, I am familiar with and accept the appointment as registered agent and agree to act	in this capacity
	9/5/
Signature/Registered Agent	Data Data
	Date
Hour Koola	9/7/00
Signature/Incorporator	Date