

TRANSMITTAL LETTER  
**P01000013670**

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

900003632909--3  
-02/05/01--01069--007  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

SUBJECT: ZEPHYR DAYS TOURS, 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  
Filing Fee  
& Certified Copy

☐ \$87.50  
Filing Fee,  
Certified Copy  
& Certificate of  
Status

**ADDITIONAL COPY REQUIRED**

FROM: WILLIAM W. ANDERSON  
Name (Printed or typed)

P.O. Box 1658  
Address

ZEPHYRH, FL 33539  
City, State & Zip

(813) 783-9909  
Daytime Telephone number

FILED  
01 FEB -5 PM 2:32  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

2  
2-601

**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:

*ZEPHYRDAYS TOURS, INC*

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

*P.O. Box 1658  
ZEPHYRHILLS, FL 33539*

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

*SELLER OF TRAVEL*

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ARTICLE IV SHARES

The number of shares of stock is:

*100*

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

*WILLIAM W. ANDERSON, PRESIDENT  
ADELE L. ANDERSON, SEC. - TREAS.  
P.O. Box 1658  
ZEPHYRHILLS, FL 33539*

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

*WILLIAM W. ANDERSON  
6015 10<sup>TH</sup> ST.  
ZEPHYRHILLS, FL 33540*

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

*WILLIAM W. ANDERSON  
6015 10<sup>TH</sup> ST.  
ZEPHYRHILLS, FL 33540*

\*\*\*\*\*  
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

*William W. Anderson*

Signature/Registered Agent *WILLIAM W. ANDERSON*

*2-1-2001*  
Date

*William W. Anderson*

Signature/Incorporator *WILLIAM W. ANDERSON*

*2-1-2001*  
Date