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TRANSMITTAL LETTER

FILED

01 JUN -8 PM 3:52

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

SUBJECT: QuestAdventure, Inc
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

no space

500004383495--6
-06/08/01--01050--011
*****87.50 *****87.50

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: Michael K. Perkins
Name (Printed or typed)

501 KNIGHTS RUN AVE #2124
Address

TAMPA FL. 33602
City, State & Zip

813-789-4002
Daytime Telephone number

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

BROWN JUN 12 2001

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

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ARTICLE I NAME

The name of the corporation shall be: Quest Adventure, Inc.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is: 1413 S. Howard Ave
Suite 202
TAMPA, FL. 33606

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: TRAVEL SERVICES

ARTICLE IV SHARES

The number of shares of stock is: 10,000

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):
Kelly Perkins CHRIS ALSOP MARK Moline Keith Friedman
President/CEO CTO VP, OPERATIONS VP, SALES

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is: Michael Kelly Perkins
501 KNIGHTS RUN AVE
2124
TAMPA, FL. 33602

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is: Michael Kelly Perkins
501 KNIGHTS RUN AVE
2124
TAMPA, FL. 33602

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

[Signature]
Signature/Registered Agent

5-8-01
Date

[Signature]
Signature/Incorporator

5-8-01
Date