120100010010583011

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

Re: Butler's Express /NC., Inc.

OI OCT 18 AMII: 50 SECRETARY OF STATE TALLAHASSEE, FLORIGA

Gentlemen:

Enclosed please find the original and one copy of the Articles of Incorporation, together with my check in the amount of \$78.75

This is an entertainment ride.

This represents the cost of the Filing Fees, Certified Copy of Articles of Incorporation and Fee for Registered Agent Designation for the above named corporation.

Very truly yours.

600004641546--3 -10/18/01--01042--005 ******78.75 *****78.75

David Duller (Individual's Name)

, Butler's Express /Nc (Name of Corporation)

— МАП	ING ADDRES	S OF CO	RPORATION	
""			III OHAHON	
260	N. Su	mmit	Ave	
	l r			
Lake	Helen	FL	32744	
	DL	HONE -		
(386)_	<i>228-35</i>	62		
Area Code	Number		Ext.	
			$\overline{}$	

PS 10/19/01/

ARTICLES OF INCORPORATION

FILED

DIOCT 18 AMII: 50

SECRETARY OF STATE

TALLAHASSEE, FLORIDA

(entertainment ride)

of

INC.

(name of corporation)

The undersigned acting as the incorporators of a corporation under the Florida Business Corporation Act, adopt(s)

Butler's Express

the following articles of incorporation for such corporation:

ARTICLE I - CORPORATE NAME The name of the corporation is: Butler's Express INC. ARTICLE II - DURATION This corporation shall exist perpetually unless dissolved according to Florida law. ARTICLE III - PURPOSE The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida. ARTICLE IV - CAPITAL STOCK The corporation is authorized to issue _____shares of common stock, par value \$ ____ per share. ARTICLE V - INITIAL PRINCIPAL OFFICE The street address of the initial principal office and, if different, the mailing address is: Summit STREET ADDRESS 32744 ZIP FLORIDA FL Helen Lake CITY Mailing address, if different STREET ADDRESS ZIP FLORIDA CITY ARTICLE VI - INITIAL REGISTERED OFFICE AND AGENT The street address of the initial registered office and the name of the initial registered agent at the office is: David A. Butler NAME N. Summit Ave **ADDRESS** FLORIDA CITY

× *		•	,					
This corpo either increased addresses of the	or aimings	l have hed from t	One ime to tin	ne by the By	-Laws, but shall r	ctors initially. Th	ne number of direct	tors may be
NAME 5	avid	A .	Bul	tler				
ADDDDGG	260	Sumi		Ave		·		
CITY	Lake	Hele			STATE	FL	ZIP 32	71111
NAME			- F F					<u> 144</u>
ADDRESS								
CITY			· · · · · · · · · · · · · · · · · · ·		STATE		ZIP	
NAME					<u> </u>		 	
ADDRESS				-				
CITY			<u> </u>	<u> </u>	STATE		ZIP	
	addresses o	f the incor	porators s		I - INCORPORA		ollows:	
ADDRESS	260	N.	Sum		Ave			
CITY L	ake	Hele			STATE	FL	ZIP 30	411.1
NAME								174
ADDRESS								
CITY					STATE		ZIP	
NAME								
ADDRESS		-					_	` ~
CITY					STATE		ZIP	<u> </u>
The undersigned	d incorpor	rator(s) ha	ve execu	ited these A	rticles of Incorp	oration this	15	**
lay ofO	ctobe	<u>:r</u>			, <u>19</u>	· -	<u> </u>	

Form 215:	ARTICLES O	F INCORPOR	ATION, PAGE 2

(Signature)

(Signature)

Divid Butter (Signature)

CERTIFICATE OF DESIGNATION REGISTERED AGENT/ REGISTERED OFFICE

FILED

01 OCT 18 AM 11:50

SECRETARY OF STATE TALLAHASSEE. FLORIDA

Butler's Express INC (name of corporation)
(name of corporation)
Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted:
The above corporation, organized under the laws of the State of Florida with its registered office
as indicated in the Articles of Incorporation
at 260N. Summit Ave
Lake Helen FL 32744
has named David A. Butler
located at the aforesaid address, as its registered agent to accept service of process within this
state.
Having been named as registered agent and to accept service of process for the above stated
corporation at the place designated in this certificate, I hereby accept the appointment as regis-
tered agent and agree to act in this capacity. I further agree to comply with the provisions of all
statutes relating to the proper and complete performance of my duties, and I am familiar with
and accept the obligations of my position as registered agent.
and accept the companions of my position as regional agents

(Signature) 10-15-01