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TRANSMITTAL LETTER

FILED
01 NOV 15 AM 9:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

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-11/15/01--01044--014
*****87.50 *****87.50

SUBJECT: OCALA ADVENTURES, INC.

Dear Sir or Madam:

Please find enclosed for filing one original and one copy of the Articles of Incorporation. Also enclosed is a check in the amount \$87.50 for the filing fee, certified copy and certificate of status.

ADDITIONAL COPY REQUIRED IS ENCLOSED

Please return to: OCALA ADVENTURES, INC.
C/O LAURENCE F. FENIMORE - Registered Agent & Incorporator
45041 STATE RD. 19
ALTOONA, FL 32702.

NOTE: The original and one copy of the articles are enclosed.

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: OCALA ADVENTURES, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business of this corporation is: 45041 STATE RD. 19 in ALTOONA, FL 32702.

The mailing address for all legal correspondence is: 45041 STATE RD. 19 in ALTOONA, FL 32702.

ARTICLE III PURPOSE

This corporation was established as a professional profit corporation.

ARTICLE IV SHARES

The aggregate number of shares which the Corporation has authority to issue 1,000 shares of common stock with no par value.

ARTICLE V INITIAL OFFICERS/DIRECTORS

LAURENCE F. FENIMORE
PRESIDENT/DIRECTOR
45041 STATE RD. 19
ALTOONA, FL 32702

TORY J. FENIMORE
VICE-PRESIDENT/DIRECTOR
45041 STATE RD. 19
ALTOONA, FL 32702

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the initial registered agent and office of the Corporation is:
LAURENCE F. FENIMORE located at located at 45041 STATE RD. 19 in ALTOONA, FL 32702.

ARTICLE VII INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation is:
LAURENCE F. FENIMORE located at located at 45041 STATE RD. 19 in ALTOONA, FL 32702.

Having been named as registered agent to accept service 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) LAURENCE F. FENIMORE - Registered Agent

11/09/01

Date


(SIGNATURE) LAURENCE F. FENIMORE - Incorporator

11/09/01

Date