

# Florida Department of State

Division of Corporations Public Access System Katherine Harris, Secretary of State

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To:

Division of Corporations

Fax Number : (850)205-0381

From:

Account Name : YOUR CAPITAL CONNECTION, INC.

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# FLORIDA PROFIT CORPORATION OR P.A.

THE VACATIONS, INC

Certificate of Status	0
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Page Count	JH 3
Estimated Charge	\$70.00



# FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

February 12, 2002

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SUBJECT: THE VACATIONS, INC.

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Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32814

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### 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:

THE VACATIONS OF SOUTH FLORIDA, INC.

#### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

12661 SW 28 CT MIRNHAR FL 33027

#### PURPOSE ARTICLE III

The purpose for which the corporation is organized is:

SALF OF VACATION, PACKAGE

## ARTICLE IV

The number of shares of stock is:

**500** 

## ARTICLE V INITIAL OFFICERS/DIRECTORS (aptional)

The name(s), address(es) and title(s):

FRANCISCO TABARES

1266/5W 28 CT MIRAMAR TO 32027

PRESIDENT

#### ARTICLE VI REGISTERED AGENT

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

FRANCISCO TABARES

12661 SW TB CT MIRHMARTC 33024

## ARTICLE VII INCORPORATOR

The name and address of the locorporator is:

TRANCISCO TABARES

12661 SW 78 CT MIRAMAR FL 32027

red an registered agent to accept nervice of process for the above stated comporation 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/Registered Agent

Signature/Incorporator

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