

TRANSMITTAL LETTER

PD2 000064409

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

FILED

02 JUN 10 PM 3:37

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SUBJECT: Everglades Vacation Rentals, Inc.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are 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: Patty Flick Richards

Name (Printed or typed)

P.O. Box 570 / 201 W. Broadway

Address

Everglades City, FL 34139

City, State & Zip

(239) 695-3151

Daytime Telephone number

700005728487--2

-06/10/02--01052--002

*****87.50 *****87.50

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

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:

Everglades Vacation Rentals, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

201 W. Broadway / P.O. Box 570 Everglades City, FL 34139

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Purpose and power of this corporation include the transaction of any business or activity permitted under the laws of the United States and this State and this Corporation shall have

ARTICLE IV SHARES

all powers granted to corporations under said laws.

The number of shares of stock is:

7500

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

Patty Flick Richards P.O. Box 570 Everglades City, FL 34139
President, Vice President, Secretary & Treasurer

ARTICLE VI REGISTERED AGENT

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


Patty Flick Richards 201 W. Broadway Everglades City, FL 34139

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Patty Flick Richards P.O. Box 570 Everglades City, FL 34139


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/Registered Agent



Date



Signature/Incorporator



Date