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•	an original and two (2) copies	of the articles of incorpo	oration and a check fo
Subject	Taurus Lodgings, Inc.	e e e e e e e e e e e e e e e e e e e	et en
P.O. Box 63	orporations 27 Florida 32314		

FROM:

Nellie Akalp

Name

30141 Agoura Rd., Suite 205

Address

Agoura Hills, California 91301

City, State & Zip

818-879-9079

Daytime Telephone number

NOTE: Please provide the original and one copy of the articles. Provide TWO copies if you have requested a certified copy as designated in the boxes above.

ARTICLES OF INCORPORATION OF Taurus Lodgings, Inc.

The undersigned incorporator, for the purpose of forming a corporation under the Florida business Corporation Act, hereby adopts the following articles of incorporation.

ARTICLE I NAME

The name of the Corporation shall be: Taurus Lodgings, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

32 West Tarpon Avenue Tarpon Springs, Florida 34689

ARTICLE III SHARES

The number of shares that this corporation is authorized to have outstanding at any one time is: 1500 at \$0.01 par value per share.

ARTICLE IV INITIAL DIRECTORS

The name(s) and address(s) of the initial Director(s) is/are:

Jeffrey Robert Willette 20301 Gray Lane Santa Clarita, California 91351

Sharon Lee Willette 20301 Gray Lane Santa Clarita, California 91351

James Ladore Willette 754 Heathrow Avenue Lady Lake, Florida 32159

ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS

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

James Ladore Willette 754 Heathrow Avenue Lady Lake, Florida 32159

The name and address of the incorporator to these Articles	s of Incorporation is:
Nellie Akalp	
30141 Agoura Rd., Suite 205	
Agoura Hills, California 91301	
Mellie als	4.3.03
Nellie Akalp, Incorporator	Date
Having been named as registered agent and to accept service of place designated in this certificate, I hereby accept the appoint capacity. I further agree to comply with the provisions of all state performance of my duties, and I am familiar with and accept the	nent as registered agent and agree to act in this tutes relating to the propey and complete
James Ladore Willette, Registered Agent	Date

SECRETARY OF STATE TALLAHASSEE, FLORIDA