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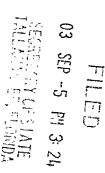
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# TRANSMITTAL LETTER

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

SUBJECT:	Ramada of	Ashburn,	Inc.	
(PROPOSED CORPORATE NAME – <u>MUST INCLUDE SUFFIX</u> )				
Enclosed are an orig	rinal and one (1) copy of the artic	cles of incorporation and	a check for:	
□ \$70.00	<b>⊠</b> \$78.75	<b>□</b> \$78.75	□ \$87.50	
Filing Fee	Filing Fee & Certificate of Status	Filing Fee & Certified Copy	Filing Fee, Certified Copy	
	00 001000 01 D	oc octation copy	& Certificate of Status	
		ADDITIONAL CO		
FROM: SCOTT HOWELL Name (Printed or typed)				
6523 US Hwy 19				
New Port Richey, FL				
727 849 8868  Daytime Telephone number				

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

Articles of Incorporation Of Ramada of Ashburn, Inc. OS ER S PROPERTY

# ARTICLE I.

The name of the profit corporation is Ramada of Ashburn, Inc.

# ARTICLE II.

The principal place of business is 6523 U. S. Highway 19, New Port Richey, Florida, 34652.

# ARTICLE III.

The purpose of this corporation is for profit.

### ARTICLE IV.

The corporation is authorized to issue 1,000 shares of stock.

# ARTICLE V.

The initial president will be Scott Harrell, currently residing at 6523 U. S. Highway 19, New Port Richey, Florida, 34652.

#### ARTICLE VI.

The registered agent is Scott Harrell, with an address of 6523 U. S. Highway 19, New Port Richey, Florida, 34652.

# **ARTICLE VII.**

The name and address of the incorporator is: Scott Harrell 6523 U. S. Highway 19 New Port Richey, Florida 34652

Signature/Incorporator

Signature/Incorporator

9-2-03

Date

9-2-03

Date