P04000099039

(Requestor's Name) (Address) (Address)	
, , , , , , , , , , , , , , , , , , ,	
, , , , , , , , , , , , , , , , , , ,	
, , , , , , , , , , , , , , , , , , ,	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
_ _ _ _	
(Business Entity Name)	
(Document Number)	
Cartification of Status	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
,	
, , , , , , , , , , , , , , , , , , ,	

Office Use Only



300037931863

DB/17/04--01024--019 **87.50



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

To Whom It May Concern,

I currently own a business, Island Rentals that is registered as a sole proprietorship. I would like to register this business as a Corporation. I have filled out the following forms to register Island Rentals as a Corporation. The current Certificate Number for Island Rentals is 54-8012954156-0. The Name Registration Number is G03309700052. If you need any further information I can be reached at (305) 587-4743 or at mmoefitz@aol.com

Thank you,

Mauren Titypinmono

Maureen Fitzsimmons Island Rentals P.O. Box 4272 Key West, FL. 33041



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

June 18, 2004

MAUREEN FITZSIMMONS P.O.BOX 4272 KEY WEST, FL 33041

SUBJECT: ISLAND RENTALS INC. Ref. Number: W04000023609

We have received your document for ISLAND RENTALS INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

The document must state the number of shares of authorized stock.

Please complete article VI with the persons name.,

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6925.

Letter Number: 504A00040747

Cynthia Blalock Document Specialist New Filings Section

In compliance with chapter 60% and/or chapter 621, F.S. (Pionic	FILED
ARTICLE I NAME The name of the corporation shall be:	04 JUN 29 PM 3:51
Island Rentals Key West Inc.	SEUNCLAMEN OF STATE TALLAHASSEE, FLORIDA
ARTICLE II PRINCIPAL OFFICE The principal place of business in ailing address is:	Address
2 146 Palm Beach Rd. P.O.	BOX 42 72 West, FL 3309)
Rental of Egy Pament / when chars	4 baby Strollers
ARTICLE IV SHARES The number of shares of stock is: On e	
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS Listname (s), address (es) and specific title (s): Moureen Fitzsimmons (Address Same as above)	
ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is:	ب مر .
2146 Palm Beach Rd. Maureen Big & Pine Ry, FL 33047	Fitzsimmons
ARTICLE VII INCORPORATOR The name and address of the Incorporator is:	
Maureen Fitzsimmons	
P.O. BOX 4077 ***********************************	********
Having been named as registered agent to accept service of process for the above stated comporation certificate, I am familiar with and accept the appointment as registered agent and agree to act in this	on at the place designated in this s capacity
Meure Haring (Signature Registered Agent Moureen Fitzs, minus	0/14/04 Date
Signature/Incorporator Novem Titzsimmons	= /14/04 Date
Manuel 111 rational	

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and for Chapter 621, F.S. (Profit)