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(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
ROBERT FOUD GAVE AUTHORIZATION BY PHONE TO CORRECT ACTION DATE TO 12004 DOC. EXAM TO

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TRANSMITTAL LETTER

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

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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)

ARTICLE I NAME

The name of the corporation shall be:

ISLAND LIVING, PALM BEACH, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 500 PALM STREET #24 WEST PALM BEACH, FL 33401 PO BOX 614, PALM BEACH, FL 33480 (MAILING ADDRESS)

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
TO OFFER AND CONDUCT GUIDED TOURS OF PALM BEACH

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

LESLIE DIVER, PRESIDENT 246 ATLANTIC AVENUE PALM BEACH, FL 33480

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

LESLIE C. DIVER 246 ATLANTIC AVENUE PALM BEACH, FL 33480

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

ROBERT G. FAUB, JR. 2642 CLIPPER CIRCLE WEST PALM BEACH, FL 33411

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

Signature/Incorporator

7/1/2004 Date

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