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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1/7/05
SH

TRANSMITTAL LETTER



Shelton Thorne
15019 Meadowlake St.
Odessa, FL 33556-3127

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

SUBJECT: AMERICAN GROUP TRAVEL OF FL, 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: SHELTON A THORNE
Name (Printed or typed)

15019 MEADOW LAKE
Address

ODESSA FL 33556
City, State & Zip

813 920 1443
Daytime Telephone number

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

AMERICAN GROUP TRAVEL OF FLORIDA, INC.

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:

AMERICAN GROUP TRAVEL CORPORATION

ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is:

**15019 MEADOW LAKE
ODESSA, FL 33556**

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO ENGAGE IN BUSINESS, FINANCIAL, AND CONSULTING SERVICES

ARTICLE IV SHARES

The number of the shares of stock is:

200

ARTICLE V INITIAL OFFICERS/DIRECTORS

The name(s) and address(es):

**SHELTON A. THORNE - PRES/VP/SECY/TREASURER
15019 MEADOW LAKE
ODESSA, FL 33556**

ARTICLE VI REGISTERED AGENT

The name and Florida address of the registered agent is:

**SHELTON THORNE
15019 MEADOW LAKE
ODESSA, FL 33556**

ARTICLE VII INCORPORATOR

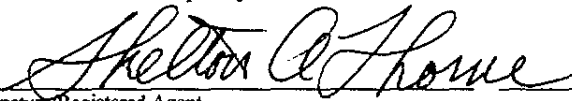
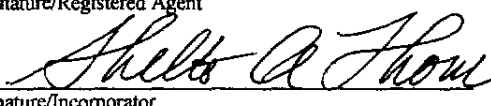
The name and address of the Incorporator is:

**SHELTON A. THORNE
15019 MEADOW LAKE
ODESSA, FL 33556**

ARTICLE VIII EFFECTIVE DATE

THE EFFECTIVE DATE OF THIS CORPORATION WILL BE JANUARY 1, 2005

.....
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 12/27/04

Signature/Incorporator _____ Date 12/27/04

FILED
05 JAN -7 PM 3:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA