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# TRANSMITTAL LETTER

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

SUBJECT: Casino	Coach,inc. (PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	ÜDE SUFFIX)
		4	•
Enclosed are an orig	ginal and one (1) copy of the art	icles of incorporation and	a check for:
□ \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	
		ADDITIONAL CO	PY REQUIRED
FROM: Lee	onard Conley		
	Name	(Printed or typed)	
	230 S.Cochran Rd		
		Address	<del></del>
	Geneva,Fl.32732		
	City	, State & Zip	
	407 349-1188		
	Daytime '	Felephone number	

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)

# DIVISION OF COME PATION 05 APR 21 AM 8: 10

### ARTICLE I NAME

The name of the corporation shall be:

Casino Coach, Inc.

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 230 S.Cochran Rd. Geneva,Fl.32732

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
Bus Tours

### ARTICLE IV SHARES

The number of shares of stock is: 1000

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Leonard Conley 230 S.Cochran Rd. Geneva, Fl. 32732 Pres, Sec, Tres.

### ARTICLE VI REGISTERED AGENT

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

Leonard Conley 230 S.Cochran Rd. Geneva,Fl.32732

### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Leonard Conley 230 S.Cochran Rd. Geneva,Fl.32732

Signature/Incorporator Date