P07000134170

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

Office Use Only



000113226820

12/21/07--01026--005 **87.50

SECRETARY OF STATE TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

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

SUBJECT:	OT VACATION	HIDE AWAY	S, INC.
7/	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	IDEISUFFIX)
Enclosed are an orio	inal and one (1) copy of the ar	ticles of incorporation and	l a check for:
Enclosed are an one	mar and one (1) copy of me ar		
\$70.00	3 \$78.75	\$78.75	\$87.50
Filing Fee	Filing Fee	Filing Fee	Filing Fee,
•	& Certificate of Status	& Certified Copy	Certified Copy
		1 .	& Certificate of
			Status
		ADDITIONAL CO	PY REQUIRED
	•	CONTRACTOR AND	
	1 /		
	Josephtko	ANC HINN	
FROM:	VWCFIT I. I KA	e (Printed or typed)	
	, -1:		
	457- SW 133	TEMPACE	
`	\	Address	,
. /	DAVIE FloRIDA	A 33325	- :
_	City	, State & Zip	
	(954) 4	73.2829	
	Daytime	Telephone number	·

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

ARTICLES OF INCORPORATION
1. The name of the corporation shall be HOT VACATION HIDEAURYS, Inc
2. The principal place of business and mailing address of the corporation is:
451-SW 133 TEMACE, DAVIE FloRIDA 33325
3. The corporation shall have the authority to issue 1000 shares of stock
4. The registered agent of the corporation is NicHolas L. FRANCHINGAND
the registered street address is 457-5W 133 TELLIKE, DAVIE
Florida <u>33325</u>
5. The initial Board of Directors shall have member (s) whoses name (s) and address
(per) is/are as follows: XXXXXXXXXX
JOSEPH F FRANCHINO 451-SW 133 TELLACE DAVIE FOLIDA 33325
VICHOLAS L FRANCHINO 451. SW.133 TEMPACE DAVIE FRANCAS33325
The number of directors may be raised or lowered by amendment of the bylaws of the Corporation but shall in no case be less than one.
6. The incorporator of this corporation is OSEPH F. FRANCHING whose
street address is 451- SW 133 TEMPACE DAVIE FLORIDA 33325
Dated 12-15-2007 Sept 7 Flanchion Incorporator

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and am familiar with and accept the obligations of my position as registered agent.

Dated /2///0/

System () Some

是是