

PO8000066768

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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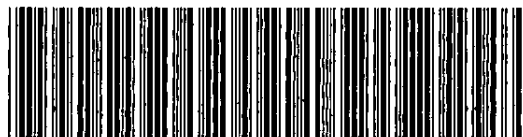
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

De

COVER LETTER

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

SUBJECT: VACATION OWNERSHIP MANAGEMENT, 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: STANLEY PRISKIE
Name (Printed or typed)

23075 SW 57 AVE
Address

BOCA RATON, FL 33428
City, State & Zip

561-674-1221
Daytime Telephone 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)

ARTICLE I NAME

The name of the corporation shall be:

VACATION OWNERSHIP MANAGEMENT, INC

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

23075 SW 57 AVE
BOCA RATON, FL 33428

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY AND ALL LAWFUL PURPOSE

ARTICLE IV SHARES

The number of shares of stock is:

100,000,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

STANLEY PRISKIE C, P, D
23075 SW 57 AVE
BOCA RATON, FL 33428

STEVEN PRISKIE S, D
23075 SW 57 AVE
BOCA RATON, FL 33428

ARTICLE VI REGISTERED AGENT

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

STANLEY PRISKIE
23075 SW 57 AVE
BOCA RATON, FL 33428

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

STANLEY PRISKIE
23075 SW 57 AVE
BOCA RATON, FL 33428

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

Stanley Priskie

Signature/Registered Agent

Stanley Priskie

Signature/Incorporator

7/8/08

Date

7/8/08

Date

FILED

08 JUL 14 PM 12:20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA