

P/2000013893

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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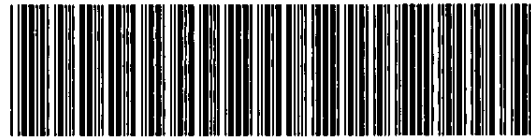
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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12 FEB -8 PM 3:25  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

W12-5806

02/09/12



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 31, 2012

JAMES BAKER  
2541 CRESTWOOD AVENUE  
NEW SMYRNA BEACH, FL 32168

SUBJECT: YE OLDE CITY TOURS, INC.  
Ref. Number: W12000005806

We have received your document for YE OLDE CITY TOURS, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Entities may file using only the entity's name. Please delete any reference to the "doing business as name" in your document. If you wish to register your fictitious name, you may do so by filing an application and submitting the appropriate fees to this office.

The title(s) in the officer/director field(s) is/are not acceptable. Please refer to the following link for acceptable officer/director title information.  
<http://www.sunbiz.org/titledef.html>.

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

The registered agent must sign accepting the designation.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6949.

Thomas Chang  
Regulatory Specialist II  
New Filing Section

Letter Number: 212A00003195

## COVER LETTER

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

SUBJECT: Ye Olde City Tours, 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: James & Elsa Baker

Name (Printed or typed)

2541 Crestwood Avenue

Address

New Smyrna Beach, FL 32168

City, State & Zip

(386) 402-6929

Daytime Telephone number

yeoldecitytours@gmail.com

E-mail address: (to be used for future annual report notification)

**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: Ye Olde City Tours, Inc.

## ARTICLE II PRINCIPAL OFFICE

Principal street address  
2541 Crestwood Avenue  
New Smyrna Beach, FL 32168

Mailing address, if different is:

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

to provide the residents, students and visitors in the Southeast Volusia are with guided tours of the historical and cultural sites as well as provide private organizations and families with customized private tours and outings. Tours will be provided by but are not limited to automotive trolleys, busses, horse drawn carriages and walking/foot traffic.

## ARTICLE IV SHARES

The number of shares of stock is: 1

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: James Baker, P  
Address: 2541 Crestwood Avenue  
New Smyrna Beach, FL 32168

Name and Title: Adrian Romo, S  
Address: 37 Fore Drive  
New Smyrna Beach, FL 32168

Name and Title: Elsa Baker, V  
Address: 2541 Crestwood Avenue  
New Smyrna Beach, FL 32168

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

Name and Title: Debra Baker, T  
Address: 2245 Turnbull Bay Road  
New Smyrna Beach, FL 32168

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

## ARTICLE VI REGISTERED AGENT

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

Name: James Baker  
Address: 2541 Crestwood Avenue  
New Smyrna Beach, FL 32168

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Elsa Baker  
Address: 2541 Crestwood Avenue  
New Smyrna Beach, FL 32168

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

Required Signature/Registered Agent

02/06/2012

Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Required Signature/Incorporator

02/06/2012

Date

RECEIVED  
12 FEB - 8 PM 3:25  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA