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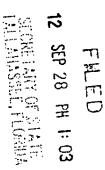
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Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		
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Office Use Only



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COVER LETTER

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

SUBJECT: Siesta Fun Rentals, Inc.				
(PROPOSED CORPORATE NAME – <u>MUST INCLUDE SUFFIX</u>)				
Enclosed are an original and one (1) copy of the articles of incorporation and a check for:				
\$70.00 \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status		
	ADDITIONAL CO	DPY REQUIRED		
FROM: Blake Parsons	(Printed or typed)			
5255 Ocean Blvd				
Address Siesta Key, FL 34242 City, State & Zip				
941346-0310 Daytime Te	lephone number			
info@Siestafunrentals.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 N. The name of the corpo	AME Siesta Fun Rentals, Inc.	F札ED
ARTICLE II PI	RINCIPAL OFFICE	12 SEP 28 PM 1: 03
	Principal street address	Mailing address, if different is:
525	5 Ocean Blvd	SECRETARY OF STAIL
	sta Key, FL 34242	IMITABASSEE, FLORIDA
ARTICLE III PU The purpose for whice All RETAIL	RPOSE h the corporation is organized is: and Renthe	1.4
ARTICLE IV SI		
ADTION IN THE		•
	ITIAL OFFICERS AND/OR DIRECTORS Blake Parsons Dresident	Name and Title:
	5255 Ocean Blvd	Address:
	Siesta Key, FL 34242	
•		
Nome and Title		Name and Tiste.
Name and Title: Address:		Name and Title:
7 tuu 033.		Addition.
-		
Name and Title: Address:		Name and Title: Address:
	GISTERED AGENT street address (P.O. Box NOT acceptable) of t Blake Parsons	he registered agent is:
Address:	5255 Ocean Blvd	
	Siesta Key, FL 34242	
ADMINI D	00DD0D470D	
ARTICLE VII IN The name and address	CORPORATOR softhe Incomprator is:	
Name:	Blake Parsons	
Address:	5255 Ocean Blvd.	
	Siesta Key, FL 34242	
Having been named a this certificate, I am fa	phifiar with and accept the appointment as regis	_
	ali Tanams Blak	Le Pacsons 9/25/2012
	Required Signature/Registered Agent	Date
I submit this document document to the Depar	nt and affirm that the facts stated herein are to timent of State constitutes a third degree felony	rue. I am aware that the false information submitted in a as provided for in s.817.155, F.S.
T) / A	the 'arons	9/25/2012
	Required Signature/Incorporator	Date
B/9/1	Required Signature/Incorporator (e Parsons	