

P13000005808

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

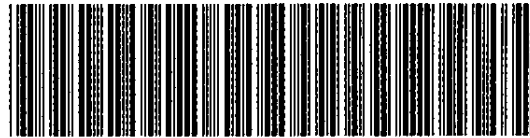
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



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SECTION 14.67 OF S. 401E
DIVISION OF CORPORATE AFFAIRS
13 JAN 16 AM 10:39

1/17/13

COVER LETTER

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

SUBJECT: Vacation Ownership Promotions 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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: Scott Meehan
Name (Printed or typed)
14755 Seminole Trail
Address
Seminole, Florida 33776
City, State & Zip
(727)776-7261
Daytime Telephone number
smeehan@tampabay.rr.com
E-mail address: (to be used for future annual report notification)

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DIVISION OF CORPORATIONS

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 Promotions Inc.

ARTICLE II PRINCIPAL OFFICE

Principal ~~street~~ address

14755 Seminole Trail

Seminole, Florida 33776

Mailing address, if different is:

P.O. Box 4965

Seminole, Florida 33775

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Promotions, Marketing and Sales

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Scott Meehan, President

Address 14755 Seminole Trail
Seminole, Florida 33776

Name and Title: _____

Address: _____

Name and Title: _____

Address _____

Name and Title: _____

Address: _____

Name and Title: _____

Address _____

Name and Title: _____

Address: _____

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SECTION OF CORPORATIONS
13 JAN 16 AM 10:39

(cont.)

Name and Title: _____ Name and Title: _____
Address _____ Address: _____

ARTICLE VI REGISTERED AGENT

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

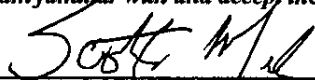
Name: Scott Meehan
Address: 14755 Seminole Trail
Seminole, Florida 33776

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Scott Meehan
Address: 14755 Seminole Trail
Seminole, Florida

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

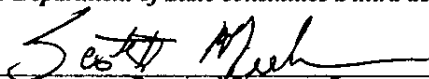


Required Signature/Registered Agent

1/14/2013

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

1/14/2013

Date

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13 JAN 16 AM 10:40
SECTION 147 OF THE STATE
DEPARTMENT OF REVENUE