

P95000017535

TRANSMITTAL LETTER

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

FILED
MAR - 1 AM 10:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SUBJECT: Vacation Block of Time Inc
(Proposed corporate name - must include suffix)

Enclosed is an original and one (1) copy of the articles of incorporation and a check for :

☐ \$70.00
Filing Fee

☒ \$78.75
Filing Fee
& Certificate

☐ \$122.50
Filing Fee
& Certified Copy

☐ \$131.25
Filing Fee,
Certified Copy
& Certificate

FROM:

David Crane
Name (printed or typed)

15777 Bolesta Rd N 125
Address

Clearwater FL 34620
City, State & Zip

(813) 881-1110
Daytime Telephone number

500001419625
-03/02/95--01093--002
****78.75 ****78.75

3/1/95
TB

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

ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

SECRETARY
TALLAHASSEE
35 HRP - 1
JUN 10 1983

ARTICLE I NAME

The name of the corporation shall be: *VACATION BREAK OF TYRONI INC.*

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

*6798 Crosswinds DR N. #1B-203
St Petersburg, Fla 33710*

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: *100*

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

*David L. Crane
15777 Beale St Rd N #123
Clearwater Fla 34620*

[Redacted Signature]

ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Donald V. [unclear] SR
616 [unclear] Court
Dade City, Fla 34608

David L. [unclear]
15777 Belstar Rd N #123
Clearwater, Fla 34620

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

Twenty day of February, 1995.

[Signature]
Signature

[Signature]
Signature

Signature

Articles of Incorporation
Filing Fee - \$35

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, FLORIDA
STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS
OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIG-
NATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF
FLORIDA.

1. The name of the corporation is: VACATION BREAK CO TYRONE

2. The name and address of the registered agent and office is:

David L CRANE / [REDACTED]
(Name)

15777 Bel Vista Rd N #125 / 6798 Clearwater CR NHB-203
(P.O. Box not acceptable)

Clearwater Fla 34698 / 57 Springburg, Fla 32110
(City/State/Zip)

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 perfor-
mance of my duties, and I am familiar with and accept the obligations of my position
as registered agent.

[Signature]
(Signature)

2/20/95
(Date)