



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State

September 20, 1995

Omni Promotions, Inc.
3208-C, E. Colonial Dr.
Suite 325
Orlando, FL 32803

SUBJECT: DESIGN TRAVEL OF ORLANDO, INC.
Ref. Number: P95000066449

Debit Memo #: 60814-D

This is to inform you that your check #1054 dated August 25, 1995 in the amount of \$122.50 and submitted for DESIGN TRAVEL OF ORLANDO, INC. has been returned to us by your bank because of Account Closed.

We request that you remit a cashier's check or money order in amount of \$137.50 made payable to the Department of State. This amount will cover the unpaid check and the service fee required by law under section 215.34, Florida Statutes.

When sending the cashiers check or money order, please indicate the debit memo number and that it is a replacement for the returned check mentioned above.

Please note: The documents filed in this office with the returned check will be cancelled unless a replacement check is received within 30 days from the date of this letter. Send the replacement check to:

Division of Corporations
Attn: Melinda Lilliston
P.O. Box 6327
Tallahassee, FL 32314

If you have any questions concerning the returned check, please call
(904) 487-6900.

Sincerely,
Melinda Lilliston
Administrative Assistant I
Division of Corporations

Letter number: 395A00043168

cc: Design Travel of Orlando, Inc.
437 N. Magnolia Avenue
Orlando, Florida 32801



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

October 27, 1995

Omni Promotions, Inc.
3208-C, E. Colonial Dr.
Suite 325
Orlando, FL 32803

SUBJECT: DESIGN TRAVEL OF ORLANDO, INC.
Ref. Number: P95000066449

Debit Memo #: 60814-D

Due to your failure to respond to our previous letter advising you of the returned check #1054, the Articles of Incorporation for DESIGN TRAVEL OF ORLANDO, INC. have been cancelled and are considered not filed as of October 25, 1995.

The name of your corporation is now available for use.

If you have any questions concerning the returned check, please call (904) 487-6900.

Sincerely
Melinda Lilliston
Administrative Assistant I
Division of Corporations

Letter number: 395A00048381

cc: Design Travel of Orlando, Inc.
437 N. Manolia Avenue
Orlando, Florida 32801

P9500006644-9

CAPITAL CONNECTION, INC.

417 E. Virginia St., Suite 1, Tallahassee, FL 32301, (904)224-8870
Mailing Address: Post Office Box 10349, Tallahassee, FL 32302
TOLL FREE No. 1-800-342-8062
FAX (904) 222-1222

NAME _____
FIRM _____
ADDRESS _____

PHONE () _____

Service: Top Priority _____ Regular _____
One Day Service Two Day Service

To us via _____ Return via _____

Matter No.: _____ Express Mail No. _____

State Fee \$ _____ Our \$ _____

*called APT 11/11/95
to confirm not operational &
address
as at 437 N. Magnolia Ave.
Orlando, FL 32801*

REQUEST TAKEN CONFIRMED APPROVED
DATE _____
TIME _____ CK No. _____
BY AAH

WALK-IN Will Pick Up 828 12/12

RE: Design Travel

of Orlando, Inc.
95 11/11/95

	C.C. FEE.	DISBURSED
Capital Express™		
Art. of Inc. File		
Corp. Record Search		
Ltd. Partnership File		
Foreign Corp. File		
() Cert. Copy(s)		
Art. of Amend. File		
Dissolution/Withdrawal		
C U S		
Fictitious Name File		
Name Reservation		
Annual Report/Reinstatement		
Reg. Agent Service		
Document Filing		
Corporate Kit		
Vehicle Search		
Driving Record		
Document Retrieval		
UCC 1 or 3 File		
UCC 11 Search		
UCC 11 Retrieval		
File No.'s. Copies		
Courier Service		
Shipping/Handling		
Phone ()		
Top Priority		
Express Mail Prop.		
FAX () pgs.		

SUBTOTALS _____

FEE.....	
DISBURSED.....	
SURCHARGE.....	
TAX on corporate supplies.....	
SUBTOTAL.....	\$
PREPAID.....	\$
BALANCE DUE.....	\$

Please remit invoice number with payment
TERMS: NET 10 DAYS FROM INVOICE DATE
1 1/2% per month on Past Due Amounts
Past 30 Days, 18% per Annum

THANK YOU
from
Your Capital Connection

FILED

55 AUG 28 PM 3:31

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION
OF
Design Travel of Orlando, Inc.

ARTICLE I

NAME OF CORPORATE ENTITY: The name of the corporation shall be

Design Travel of Orlando, Inc.

ARTICLE II

EXISTENCE: The duration of the corporation shall be perpetual; commencement of the corporation's existence shall begin as the date and time of the filing of the Articles of Incorporation by the Department of State.

ARTICLE III

GENERAL PURPOSES: The general purpose for which this corporation has been organized is to the transaction of any and all lawful business for which corporations may be incorporated under the Laws of the State of Florida or the Laws of the United States.

ARTICLE IV

SHARES OF STOCK: The aggregate number of shares which the corporation shall have authority to issue shall be one thousand (1,000) shares of common stock with a par value of ten Dollars.

ARTICLE V

REGISTERED OFFICE: The principle address of the corporation and the initial registered office are the same and shall be: 437 N. Magnolia Ave Orlando FL 32801

ARTICLE VI

DIRECTORS: Pursuant to the Florida General Corporation Act, this corporation shall have 2 directors: LISA GRANT 1323 Calhoun Ave / Winter Springs, FL 32708
RONALD C. GRANT 1323 Calhoun Ave / Winter Springs, FL 32708

ARTICLE VII

INCORPORATOR: The sole incorporator of this corporation shall be: Lisa Grant
437 W Magnolia Ave, Orlando, FL 32801
I, the undersigned being the original subscriber and incorporator of the foregoing corporation, do hereby certify that the foregoing constitutes the proposed Articles of Incorporation for

Signed, sealed and delivered
in the presence of:

Marilyn N. Koblasz _____
Subscriber / Incorporator

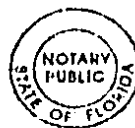
STATE OF FLORIDA)
COUNTY OF ORANGE)

The foregoing instrument was acknowledged before me this 22nd day of August
1995 by LISA GRANT who has produced DL # G653-533-64-886-0
as identification and who did/did not take an oath.

Marilyn N. Koblasz
Signature of Person Taking acknowledgement

Name of Acknowledger Typed, Printed or Stamped

Title or Rank / Serial Number if any



MARILYN N. KOBLASZ
My Comm Exp. 12/03/96
Bonded By Service Ins
No. CC244045
Personally Known 11 Other I.D.

REGISTERED AGENT DESIGNATION

I, Liba Grant, hereby accept the designation as Registered Agent for

DATED: This 21 day of August 1995

Liba Grant
437 N. Magnolia Ave
Orlando, FL 32801

55 AUG 28 PM 3:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

DEBIT MEMORANDUM

FOR OFFICIAL USE

NUMBER

DATE

TO : DEPARTMENT OF STATE

P 95 0000 66449

STATE OF FLORIDA
OFFICE OF STATE TREASURER
TALLAHASSEE FLORIDA

FUND	AMOUNT	REASON RETURNED	KEY #
GENERAL REVENUE	0.00	INSUFFICIENT FUNDS	1
TRUST	4,032.00	ACCOUNT CLOSED	2
OTHER		UNCOLLECTED FUNDS	3
TOTAL	4,032.00	OTHER	4

CROSS REF	SAMAS CODE	DISTRIBUTION	REASON	AMOUNT
12	45-20-2-130001-45300000-00-000100-00		1	35.00
12	45-20-2-130001-45300000-00-000100-00		2	52.00
12	45-20-2-130001-45300000-00-000100-00		1	122.50
12	45-20-2-130001-45300000-00-000100-00		2	122.50
12	45-20-2-130001-45300000-00-000100-00		4	225.00
12	45-20-2-130001-45300000-00-000100-00		1	225.00
12	45-20-2-130001-45300000-00-000100-00		1	225.00
12	45-20-2-130001-45300000-00-000100-00		1	225.00
12	45-20-2-130001-45300000-00-000100-00		1	225.00
12	45-20-2-130001-45300000-00-000100-00		1	232.50
12	45-20-2-130001-45300000-00-000100-00		1	233.75
12	45-20-2-130001-45300000-00-000100-00		4	375.00
12	45-20-2-130001-45300000-00-000100-00		1	375.00
12	45-20-2-130001-45300000-00-000100-00		4	583.75
12	45-20-2-130001-45300000-00-000100-00		1	775.00
12	45-20-2-130001-45300000-00-000100-00		1	

GRAND TOTAL:

\$ 4,032.00
05 SEP 14 PM 2:15
OFFICIAL MANAGEMENT

RECEIVED

Process Date: 09/05/95

The above named fund(s) has been reduced by the amount of this check(s) under authority of Section 215.34, F.S.

Bill Nelson

State Treasurer

① 1054

53-66 51 12

OMNI PROMOTIONS, INC. 07-55
3205 C.E. Colonial Dr., Suite 325
Orlando, FL 32803

8-25 95

5/22/90

50 00 DOLLARS

PAY TO THE ORDER OF

Secretary of State

One hundred twenty two

Account Closed

8/21/96

AMSOUTH
AmSouth Bank of Florida

FOR

⑈001054⑈ ⑈06310468⑈ 3720072554⑈

⑈000007250⑈

THE UNIVERSITY OF CHICAGO

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