

NAME, HORSE AND CHAISE RENTRLS AND PROPERTY MANAGEMENT. IN FAX AUDIT NUMBER, H9500010467 CURRENT STATUS, REQUESTED DATE REQUESTED, 09/19/1995 TIME REQUESTED, 14,10,17 CERTIFIED COPIES. I CERTIFICATE OF STATUS, 0 METHOD OF DELIVERY, FAX ESTIMATED CHARGE, \$122.50 ACCOUNT NUMBER, 075350000267 Note; Please print this page and use it as a cover sheet when submitting documents to the Division of Corporations, Your document connot be processed without the information contained on this page. Remember to type the Fex Audit number on the top and bottom of all pages of the document. (((H95000010467)))

** ENTER (CR) TO RETURN TO THE DOCUMENT LIST, ENTER 'M' FOR MENU. **
ENTER SELECTION AND (CR),

<u>,97;4~</u>]4

95 SEP 19 PH 4: 03
SECRETARY OF STATE
TALLAHASSEE, FI CRIM

SECTION OF COMMONWERS
SECTION OF SECTION OF

KANETSKY-MOORE

H95000010467

ARTICLES OF INCORPORATION

OF

HORSE AND CHAISE RENTALS AND PROPERTY MANAGEMENT.

The undersigned incorporator for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation:

ARTICLE I

NAME and ADDRESS

The name of the corporation small be HORSE AND CHAISE RENTALS AND PROPERTY MANAGEMENT, INC.

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

Corporate Address:

402 Barcelona Ave. Venice, FL 34285

ARTICLE II

TERM OF EXISTENCE

perpetual. Corporate existence shall begin on September 1995.

THIS INSTRUMENT PREPARED BY Brik R. Licherman Attorney At Law P.O. Box 1767 Venice, Florida 34284-1767 (813) 465-1571 Fla. Bar #393053

H95000010467

1195000010467

ARTICLE III

NATURE OF BUSINESS

The purpose of the corporation is to transact any business and to engage in, enter into, promote or conduct any or all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, country, territory or nation.

ARTICLE_IV

CAPITAL STOCK

The total number of shares of stock which the corporation shall have authority to issue is 500 shares, all of which shall be common shares with a par value of \$1.00 per share. The corporation elects to have preemptive rights.

ARTICLE V

REGISTERED AGENT

The street address of the initial registered office of the corporation in Sarasota County, Florida, and the name of its initial registered agent at such address are as follows:

Name and street address

LINDA S. BRADWAY 402 Barcelona Ave. Venice, FL 34285

1195000010467

ARTICLE_VI

BOARD OF DIRECTORS

The corporation shall have a Board of Directors of one (1) director initially. The number of directors shall be prescribed by the Bylaws of the corporation from time to time. The name and address of the person who shall serve as the initial director of the corporation until the first annual meeting of the shareholders or until their successors are duly elected and qualified are as follows:

Name and atreet address

LINDA S. BRADWAY 402 Barcelona Ave. Venice, FL 34285

ARTICLE VII

INCORPORATOR

The name and address of the Incorporator to these Articles of Incorporation is:

Name and street address

LINDA S. BRADWAY 402 Barcelona Ave. Venice, FL 34285

IN WITNESS WHEREOF, the undersigned, being the incorporator hereinbefore named, for the purpose of forming a corporation pursuant to the Florida Business Corporation Act, has

3

H95000010467

executed these Articles of Incorporation this 19 day of September, 1995.

Incorporator

STATE OF FLORIDA COUNTY OF SARASOTA

The foregoing instrument was acknowledged before me this day of _________, 1995, by LINDA S. BRADWAY, who is personally known to me or who has produced a driver's license as identification and who did not take an eath.

LANGE R. LINE EFFICIAN

My Course for 120 1901

COURSE FOR 180187

Printed Name of Notary:
ERIK R. LIEBERMAN

Notary Public Commission #_

My commission expires:

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THESE ARTICLES OF INCORPORATION, 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 PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCUPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

4

Registered Agent

DATE: 9-19-9

STATE STATE

ERL\ja\horseand.sol