P9600002608

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

SUBJECT: Polican Tours Incorporated				
(1	Proposad corporate	name - must include su	dfix)	Sin
Enclosed is an origina	l and one (1) co	py of the articles o	f incorporation	and a check
for : \$70.00 Filing Fas	X \$78.75 Filing Fee & Certificate	\$122.50 Filling Fee & Certified Copy Additional Copy	\$131.25 Filing Fee, Certified Copy & Certificate y Required	
FROM:	Steven B. Gr Name	ondbread printed or typed)		
	4767 Bilmar	Avenue Address	~U17	90001679736 04/3601089001 **78,75 *****78,75
	Fort Myers. City	F1. 33901 /, State & Zip		
	(941)_936-70 Daytime	55 Telephone number	<u> </u>	

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.

ARTICLE I NAME

The name of the corporation shall be:

Polican Tours Incorporated

ARTICLE II PRINCIPAL OFFICE

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

4767 Bilmark Avonue Fort Myers, Fl. 33901

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:

Steven B. Goodbread 4767 Bilmark Avenue Fort Myers, Fl. 33901

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

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

Stoven B. Goodbrond - Promident 4767 Bilmark Avenue, Fort Myers, Fl. 33901

Losloy A. Goodbroad - Vico Prosident 4767 Bilmerk Avenue, Fort Myers, Fl. 33901

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

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

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

1. The name of the corporation is:	. Policon Tours Inco	prpornted
2. The name and address of the regis	stered agent and office is:	7-10 LO
	Stoven B Goodbron (NAME)	ad 1
(P.O. Bo	4767 Bilmark Avanu ox or Mail Drop Box NOT ACCEPT	TABLE)
***	CHY/STATE/ZIP)	3901
Having been named as registered of corporation at the place designated is agent and agree to act in this capacities relating to the proper and complete poolingations of my position as register	in this certificate, I hereby ac ity. I further agree to compl performance of my duties, an	ccept the appointment as registered by with the provisions of all statutes.
LA SE (SIGNATUR	(E)	January 2, 1996