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TRANSMITTAL LETTER

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314 SUBJECT: TAYLOR MADE EXCURSIONS (Proposed corporate name - must include suffix) 100001716241 -02/15/96--01097--009 *****78.75 *****78.75 Enclosed is an original and one (1) copy of the articles of incorporation and a check for: \$70.00 \$122.50 131.25 Filing Fee Billing Fee Filing Fee Filing Fee, & Certified Copy Certificate Certified Copy & Cerdificate Additional Copy Required APRIL POLSTON FROM: Name (printed or typed): LAW OFFICES OF MICHAEL R. BARNES Address 513 WHITEHEAD STREET KEY_WEST, FL 33040 City, State & Zip (305) 296-5297 Daytima Telephone number FEB 1 9 1995

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

FILED SECRETARY OF STATE IDIVISION OF CORPORATIONS

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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:

TAYLOR MADE EXCURSIONS, INC.

ARTICLE II PRINCIPAL OFFICE
The principal place of business and mailing address of this corporation shall be:

100 GRINNELL STREET, KEY WEST, FLORIDA 33040

ARTICLE III SHARES

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

100 shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and address of the initial registered agent is:

Michael R. Barrnes, 513 Whitehead Street, Key West, F1 33040

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):

TIM TAYLOR, 100 GRINNELL, STREET, KEY WEST, FL 33040 PRESIDENT, VICE_PRESIDENT, SECRETARY AND TREASURER

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

| 9th day of _ | February | |
|--------------|-----------|---------------|
| | 7 | |
| | | Signature |
| | AT MIT | LOR PRESIDENT |
| - | Signature | |
| | · | Signature |

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

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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: | TAYLOR MADE EXCURSIONS, IN | <u>c.</u> |
|--|---|---|
| 2. The name and address of the regist | stered agent and office is: | _ |
| MTCHAI | FI. P. BARNES (NAME) | |
| 513 (P.O. Box | WHITEHEAD STREET ON OF Mail Drop Box NOT ACCEPTABLE) | |
| KEY | Y WEST FL 33040 (CITY/STATE/ZIP) | |
| corporation at the place designated in agent and agree to act in this capacit | egent and to accept service of process for the nine of the appointment of the appointment. If the appointment is a further agree to comply with the provision of the appointment of the appointment of the appointment of the agree of the agent. | ent as registered ns of all s atules |
| (SIGNATURE | | 16 |