796 THOUSE TO 4842

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

500727705-01027-0045 +06727705-01027-004 ****191.25

Enclosed is an origin	al and one (1) co	ppy of the articles of	incorporation i	and a check
for : \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	#122.50 Filing Fee & Certified Copy Additional Copy	\$131.25 Filing Fee, Certified Copy & Certificate Required	
FROM	Gary Tingley Name (printed or)typed) 8900 N. Armenia AVE. * 312			5 JUN 26 26 JUN 26 26 JUN 26
		Address LORION 33604		1/2 / 1/2 mg/g/1
	1-01.757-7	y, State & Zip 3 - 442		PR 2: 26 PR 2: 26
		Telephone number 2 7 1996	}	

10LEWOOD RESORTS Inc.

(Proposed corporate name - must include suffix)

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:

IDLEWOOD RESORTS, Inc.

ARTICLE II PRINCIPAL OFFICE

SUM 26 M 2: 26

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

8900 N. ARMENIA AVE. Suite * 312 Tampa, FLORIDA 33604

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:

Gary Tingley 3116 W. Hawthorne Ave. Tampa, FLORIDA 33611

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):

Bary Tingley 3116 W. Hawtworne Ave. Tampa, Florion 33611

Crain Tingley
10414 ST. Tropez PL.
Tampa, FLORIDA 33615

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

24 day of JUNE 1 , 19 96

(An additional article must be added if an effective date is requested.)

Signature

ignature

Signature

Notarization is not required

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:	IDLEWOOD RESORTS, IAC.	
2. The name and address of the register	red agent and office is:	S S S S
Gary Tine	(NAME)	ASSET PROPERTY.
3116 W. Haw P.O. Box o	Mail Drop Box NOT ACCEPTABLE)	2:26 2:26
Tompa, Flori	ON 336U (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 performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

(SIGNATURE) (DATE)