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940 Boulevard of the Arts Sarasota, Florida 34236

Tel: (941) 366-2293 FAX: (941) 957-4162

January 16, 1997

500002069535--4 -01/28/97--01021--012 \*\*\*\*\*70.00 \*\*\*\*\*\*70.00

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

Re: <u>VACATION CONXIONS, INC.</u>

Dear Sir/Madam:

Enclosed please find an original and two copies of the Articles of Incorporation, along with \$35.00 filing fee on behalf of the corporation. Please note that the effective date of the corporation is to be January 22, 1997. Should the enclosed be satisfactory, please date stamp one copy and return the same to me in the enclosed, self-addressed envelope.

I have also enclosed the Certificate of Designation of Registered Agent/Registered Office for the Corporation, along with a \$35.00 filing fee on behalf of the corporation.

Thank you for your assistance in this matter.

Sincerely.

Diane Penn

dp Enclosures

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## TRANSMITTAL LETTER

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

SUBJECT: VACATION CONXIONS, INC.

Enclosed is an original and one (1) copy of the articles of incorporation and a check for: \$70.00.

FROM: Diane Penn

940 Boulevard of the Arts

Sarasota, Florida 34236

## ARTICLES OF INCORPORATION

OF

VACATION CONXIONS, INC..



The undersigned incorporator has executed these Articles of Incorporation to establish a corporation (the "Corporation") under the Florida Business Corporation Act (Chapter 607, Florida Statutes).

1. Name. The name of the Corporation is:

VACATION CONXIONS, INC.

2. <u>Principal office.</u> The principal office of the Corporation is:

940 Boulevard of the Arts Sarasota, Florida, 34236

3. Mailing Address. The mailing address of the Corporation is:

940 Boulevard of the Arts Sarasota, Florida, 34236

- 4. <u>Authorized shares</u>. The number of shares of stock that this corporation is authorized to have outstanding at any one time is 1000 shares of common stock, no par value.
- 5. Bylaws. The initial bylaws of the Corporation shall be adopted by the incorporator or the board of directors.
- 6. <u>Registered Agent and Office.</u> The name and address of the initial registered agent is:

Diane Penn 940 Boulevard of the Arts Sarasota, Florida 34236

By execution hereof, the undersigned accepts appointment as registered agent of the Corporation, and acknowledges that she is familiar with the obligations of the position.

7.  $\underline{\text{Incorporator.}}$  The name and address of the incorporator of the Corporation is:

Diane Penn 940 Boulvard of the Arts Sarasota, Florida 34236

Dated this 162 day of January, 1997.

Diane Penn

Incorporator/Registered Agent

## CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, FLORIDAY 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: <u>VACATION CONXIONS</u>, INC.
- 2. The name and address of the registered agent and office is:

Diane Penn

940 Boulevard of the Arts

Sarasota, Florida 34236

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)

Jan 16, 1997