DATE

Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Re: LC VAIL E	DIVISION OF STATE DIVISION OF CORPORATIONS 97 APR 23 PM 2: 16 NTERPRISES, Inc.
Gentlemen: Enclosed please find the original and one copy of	the Articles of Incorporation, together with my
check in the amount of \$122.50. This represents the cost of the Filing Fees, Certific Registered Agent Designation for the above name	ied Copy of Articles of Incorporation and Fee for ed corporation.
Very	(Individual's Name) (Individual's Name)
	LC VAIL ENTERPRISES, Inc. (Name of Corporation)
	5320 Adams Road
	DelRay Beach FL PHONE (561) 4961610

ARTICLES OF INCORPORATION

of				
LC VAIL ENTERPRISES, inc.	_			
(name of corporation)	-			
The undersigned acting as the incorporators of a corporation under the Florida Business Corporation Act, adapt the following articles of incorporation for such corporation:	S)			
ARTICLE I - CORPORATE NAME	2000			
The name of the corporation is:	3			
LC VAIL ENTERPRISES, inc.	5			
ARTICLE II - DURATION				
This corporation shall exist perpetually unless dissolved according to Florida law.				
ARTICLE III - PURPOSE				
The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida.				
ARTICLE IV - CAPITAL STOCK				
The corporation is authorized to issueshares of common stock, par value \$ per share.				
ARTICLE V - INITIAL PRINCIPAL OFFICE The street address of the initial principal office and, if different, the mailing address is:				
STREET ADDRESS	$\overline{}$			
5320 Adams Road				
CITY De/RAY BEACH FLORIDA ZIP 3348	24			
Mailing address, if different				
STREET ADDRESS				
	ļ			
CITY FLORIDA ZIP				
ARTICLE VI - INITIAL REGISTERED OFFICE AND AGENT				
The street address of the initial registered office and the name of the initial registered agent at the off	ice is:			
NAME LC VAIL				
ADDRESS 5320 Adams Load	$\neg \neg$			
CITY De/RAY Reach FLORIDA ZIP 3340	84			

ARTICLE VII - INITIAL BOARD OF DIRECTORS

• This corporation shall have (o NC) directors initially. The number of directors may either increased or diminished from time to time by the By-Laws, but shall never be less than one (1). The names and		
ddresses of the initial director(s) of the corporation are as		sio (1). The names and
NAME L C V A i L		
ADDRESS 5320 Adams +	2.14	
CITY Deleay Beach	STATE PL	ZIP 33484
NAME	The second secon	3 3 78 7
ADDRESS		
CITY	STATE	ZIP
NAME		
ADDRESS		
CITY	STATE	ZIP
APTICIEVI	II - INCORPORATORS	
The names and addresses of the incorporators signing thes		allowe.
	·	
NAME LC VAIL P	es J.D. Sec. d STATE FL.	
ADDRESS 5320 Adams ROA	d	
CITY DelRAY BEACH	STATE FL.	ZIP 33484
NAME		
ADDRESS		
CITY	STATE	ZIP
NAME		
ADDRESS		
CITY	STATE	ZIP
The undersigned incorporator(s) have executed these	Articles of Incorporation this	18th
day of cosil	, 19 <u>97</u> .	
	Λ	
	Me Vail &	es un lac. (Signature)
		(Signature)
		(Signature)

CERTIFICATE OF DESIGNATION REGISTERED AGENT/ REGISTERED OFFICE

DIVISION OF CORPORATIONS

97 APR 23 PM 2: 16

$L \subset$	VAIL ENTERPRISES, inc.	
(name of corporation)		

Pursuant to Florida Statutes Sections	48.091 and 607.0501, the following is submitted:
The above corporation, organized und	ler the laws of the State of Florida with its registered office
as indicated in the Articles of Incorpo	ration
at5320 Adams	Road
Deleny Beno	ch, FL, 33484
has named VALL	_

located at the aforesaid address, as its registered agent to accept service of process within this state.

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) 4.16, 97
(Date)