

"ACCURATE" FILING & SEARCH SERVICES



P970000064586

3424-18 Old St. Augustine Road
Tallahassee, Florida 32311

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(904) 671-1741

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. Ponce De Leon Hotels of Orlando, Inc.
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

- ☒ Walk in
 ☒ Pick up time 2:30
 ☒ Certified Copy
☐ Mail out
 ☐ Will wait
 ☐ Photocopy
 ☐ Certificate of Status

NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

DIVISION OF CORPORATION
 97 JUL 25 PM 12:03

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 -07/28/97--01001--001
 ****262.50 ****122.50

Examiner's Initials

7/25/97

ARTICLES OF INCORPORATION
OF

PONCE DE LEON HOTELS OF ORLANDO, INC.

FILED
97 JUL 25 PM 2:30
DEPT. OF REVENUE
TALLAHASSEE, FLORIDA

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

PONCE DE LEON HOTELS OF ORLANDO, INC.

ARTICLE II PRINCIPAL OFFICE

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

6649 Westwood Boulevard, Suite 130
Orlando, Florida 32821

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to issue is: 10,000 shares of no par value common stock.

ARTICLE IV BOARD OF DIRECTORS

The initial Board of Directors shall consist of one (1) member whose name and address is:

Richard C. Kessler
6649 Westwood Boulevard, Suite 130
Orlando, Florida 32821

ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

CT Corporation System
1200 South Pine Island Road
Plantation, Florida 33324

ARTICLE VI INCORPORATORS

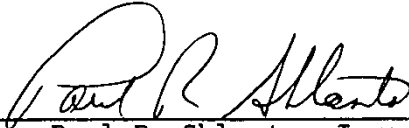
The name and street address of the incorporator of these Articles of Incorporation is:

Paul R. Shlanta, Esquire
Rowe, Foltz & Martin, P.C.
Five Piedmont Center, Suite 750
Atlanta, Georgia 30305

ARTICLE VII INDEMNITY

The directors of the Corporation shall be indemnified by the Corporation to the full extent provided or permitted by Section 607.0850, Florida Business Corporation Act.

The undersigned incorporator has executed these Articles of Incorporation this 23rd day of July, 1997.



Paul R. Shlanta, Incorporator

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, 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: Ponce de Leon Hotels of Orlando, Inc.,
a Florida corporation

2. The name and address of the registered agent and office is:

CT Corporation System

(Name)

1200 South Pine Island Road

(P.O. Box not acceptable)

Plantation, Florida 33324

(City/State/Zip)

FILED
JUL 25 1997
TALLAHASSEE, FLORIDA

97 JUL 25 PM 2:30

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)

JENNIFER F. FALTMAN
ASSISTANT SECRETARY

7-22-97

(Date)