

**P98000026555**

**TRANSMITTAL LETTER**

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

**200002462192--0  
-03/19/98--01088--010  
\*\*\*\*\*70.00 \*\*\*\*\*70.00**

**SUBJECT: BRIAR PATCH BED AND BREAKFAST INC.**  
*(Proposed corporate name--must include suffix)*

**Enclosed is and original and one (1) copy of the articles of incorporation  
and a check for:**

**\$70.00  
FILING FEE**

**From: Michael L. Vail**  
*Name (Printed or typed)*

**16814 ARROWHEAD BLVD**  
*Address*

**WINTER GARDEN, FLORIDA, 34787**  
*City, State & Zip*

**407-257-6476**  
*Daytime Telephone number*

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

**FILED  
98 MAR 19 AM 9:42  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**

*m 3/23/98*

## ARTICLES OF INCORPORATION

FILED

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

98 MAR 19 AM 9:42

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

### ARTICLE I NAME

The name of the corporation shall be:

**BRIAR PATCH BED AND BREAKFAST INC.**

### ARTICLE II PRINCIPAL OFFICE

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

**16814 ARROWHEAD BLVD., WINTER GARDEN, FLORIDA, 34787**

### ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is  
**1000**

### ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and Florida street address of the initial registered agent:

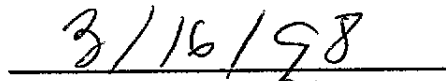
**MICHAEL L. VAIL, 16814 ARROWHEAD BLVD.,  
WINTER GARDEN, FLORIDA, 34787**

### ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

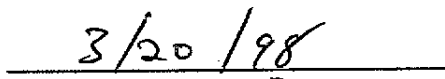
**LORETTA R. VAIL, 16814 ARROWHEAD BLVD.,  
WINTER GARDEN, FLORIDA, 34787**

  
Signature/Incorporator

  
Date

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/Registered Agent

  
Date