TRANSMITTAL LETTER

P98000068354

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

SUBJECT:	Greek Escapes, In (Proposed corpo	C . orate name - must include su	ffix)	<u> </u>
		6	00002605 -08/03/98 *****78.75	55966 01097005 *****78.75
Enclosed is an original an	d one(1) copy of the article	es of incorporation and a	check for:	_
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	□\$122.50 Filing Fee & Certified Copy	\$131.25 Filing Fee, Certified Copy & Certificate	
		ADDITIONAL CO	PY REQUIRED	
FROM:	Mary Kalabok Name (F	is Printed or typed)	i i	- -
_				
Cape Coral, Florida 33904 City, State & Zip				

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

Daytime Telephone number

(941)540-8060

ARTICLES OF INCORPORATION

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

Article 1 NAME

The Name of the corporation shall be: GREEK ESCAPES, Inc.

PRINCIPAL OFFICE

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

Street address:

Mailing address:

5317 Cortez Court

PO Box 1257

Cape Coral, FL 33904

Cape Coral, FL 33910

Article 3 SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 20,000

INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent are:

Mary Kalabokis

5317 Cortez Court

Cape Coral, Fl 33904

Article 5 INCORPORATOR

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

Mary Kalabokis

5317 Cortez Court

Cape Coral, Fl 33904

EFFECTIVE DATE

The effective date of the corporation is:

Augūst 3, 1998

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.