TRANSMITTAL LETTER

P98000074789

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

SUBJECT:	Affinity Group I; Inc.			
	(Proposed corp	orate name - must include su	ffix)	_
		31	000026237 -08/24/9801 *****78.75	*43 138- ****
Enclosed is an original a	nd one(1) copy of the articl	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:	Gabrielle L. Mo			
	Name (Printed or typed)		
	1768 Village	Pkwy		
_		Address	SEI SEI	-
<u>. </u>	Gulf Breeze, Fl. 32561			
, 	City, State & Zip		SECRETARY OF STA	FILED
	(850) 916–4227		목	D
	Daytime ?	Telephone number	STATE LORIDA	; - >

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

ARTIČLES 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.

NAME ARTICLE I

The name of the corporation shall be:

AFFINITY GROUP-I, Inc.

PRINCIPAL OFFICE ARTICLE II

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

1768 Village Parkway Gulf Breeze, Fl. 32561 Place of Business:

SHARES ARTICLE III

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

500 shares

INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Gabrielle L. Mook

1768 Village Pkwy

Gulf Breeze, Fl.

INCORPORATOR ARTICLE VS

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

Gabrielle L. Mook

1768 Village Pkwy

Gulf Breeze, Fl.

Signature/Incorporator

(An additional article must be added if an effective date is requested.)

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