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Alex Claudio 12335 Beacontree Way, Orlando, FL. 32837		37	98 AUG 3 SECRETALLAHAS	
City/State/			Office Use Only	
	NAME(S) & DOCUM	ENT NUMBER	(S), (if known):	
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NonProfit	Resignation of R.A.,	Officer/ Director	****122.50 *****122.50	
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Other				
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OTHER FILINGS	REGISTRAT	TOST		
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Fictitious Name	Foreign			
Name Reservation	Limited Partnership		$\langle C_{q} \rangle_{\mathcal{V}}$	
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	Trademark	-		

Other

Examiner's Initials

ARTICLES OF INCORPORATION

OF

Dream Coach, Inc.



ARTICLE I NAME

The name of the corporation shall be: Dream Coach, Inc.

ARTICLE II PRINCIPAL OFFICE

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

12335 Beacontree Way

Orlando, Florida 32827

ARTICLE III CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 10,000 shares of Common Shock at a par value of \$1.00 per share.

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

John Gillen

2314 Holly Ridge Dr.

Ocoee, Florida 34761

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ARTICLE V INCORPORATOR

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

Alejandro Claudio

12335 Beacontree Way

Orlando, Florida 32837

The undersigned has executed these Articles of Incorporation this ______ day of August 1998

, Incorporator

CERTIFICATE OF DESIGNATION

REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607.0501, 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:

Dream Coach, Inc.

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

John Gillen

2314 Holly Ridge Dr.

Ocoee, Florida 34761

Title: Incorporator

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.