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

| SUBJECT: | i cortes (Proposed corpor | Tavel corate name - must include sur | Sh C |
|--------------------------|--|--|--|
| | | 50 | 10002666595 -10/19/9801037024 *****78.75 *****78.75 |
| Enclosed is an origin | nal and one(1) copy of the article | s of incorporation and a | check for: |
| \$70.00 Filing Fee | ☐ \$78.75 Filing Fee & Certificate of Status | □\$78.75 Filing Fee & Certified Copy | \$87.50 Filing Fee, Certified Copy & Certificate of Status |
| ADDITIONAL COPY REQUIRED | | | PY REQUIRED S |
| FROM: | 7714 Lix | tes Travel rinted or typed) He Rd Address | TANY OF STATE ANSSEE, FLORIDA |
| | New Port Ri | Chey Fo | 70 (00) 00 oct |
| | Daytime Te | elephone number | 19 M.D. 53 |

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

ARTICLES OF INCORPORATION DICORTE'S TRAVEL, INC.

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:

DICORTE'S TRAVEL, INC.



ARTICLE II PRINCIPLE OFFICE

The initial principle place of business of this corporation shall be c/o David DiCorte 7714 Little Road, New Port Richey, Florida 34653 and the mailing address shall be c/o David DiCorte, P.O. Box 372, New Port Richey, Florida 34656.

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is 100 shares at no (\$0.00) par value per share.

ARTICLE IV INITIAL REGISTERED AGENT NAME AND STREET ADDRESS

The name initial registered agent is Karen Hope Yore whose address is 82 Ann Circle, Creawfordville, Florida 32327. The undersigned incorporator has executed these Articles of Incorporation this <u>1st</u> day of March 1998.

Karen Hope Yore

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT AND REGISTERED AGENT OFFICE

1 >

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, F.S., 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.

The name of the Corporation is:

DICORTE'S TRAVEL, INC.

The name and address of the Incorporator is:

Karen Hope Yore 82 Ann Circle Crawfordville, Florida 32327 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.

Maren Hope Yore

Dated this <u>1st</u> day of <u>March</u>, 1998.

98 OCT 19 AM II: OO
SECRETARY OF STATE
TAIL AHASSEE, FLORIDA