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Florida Department of State  
Division of Corporations  
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Katherine Harris, Secretary of State

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## To:

Division of Corporations  
Fax Number : (850) 922-4001

## From:

Account Name : FAS-T CORP. AGENTS, INC.  
Account Number : 071001002335 —  
Phone : (305) 599-0839  
Fax Number : (305) 716-0346

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS**FLORIDA PROFIT CORPORATION OR P.A.****GREAT VALUE VACATIONS, INC.**

Certificate of Status	0
Certified Copy	1
Page Count	03
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B. McKnight JUL 23 1999

**ARTICLES OF INCORPORATION**  
**OF**  
**GREAT VALUE VACATIONS, INC.**

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*The undersigned incorporators desire to form a corporation pursuant to Chapter 607, Florida Statutes and hereby adopt the following articles of incorporation for such corporation.*

**ARTICLE I**

**NAME:** *The name of the corporation shall be:*

**GREAT VALUE VACATIONS, INC.**

**ARTICLE II**

**PURPOSE AND POWER:** *The purpose for which the corporation is formed is to engage in any activity and business permitted under the laws of the State of Florida.*

**ARTICLE III**

**PRINCIPAL OFFICE:** *The address of the corporation's principal office shall be:*

**1256 MILAN AVE.  
CORAL GABLES, FL. 33134**

**ARTICLE IV**

**INCORPORATOR(S):** *The name and address of the incorporator(s) is  
(are):*

**FERMIN PEREZ  
1256 MILAN AVE.  
CORAL GABLES, FL. 33134**

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**FERMIN PEREZ**  
**1256 MILAN AVE.**  
**CORAL GABLES, FL. 33134**


## ARTICLE VI

## ARTICLE VII

## ARTICLE VIII

**FERMIN PEREZ**  
**1256 MILAN AVE.**  
**CORAL GABLES, FL. 33134**

Penicillium Penicillium



**ANGEL D. CORDOVA**  
**NOTARY PUBLIC, State of Florida**  
NOTARY PUBLIC - STATE OF FLORIDA  
ANGEL D. CORDOVA  
COMMISSION # CC00002  
EXPIRES 06/2003  
BONDED THREE ASA L-100-NOTARY

*In compliance with section 607.034 of the Florida Statutes, the following is submitted:*

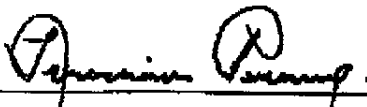
*desiring to organize or qualify under the laws of the State of Florida, with its principal place of business in the City of CORAL GABLES County of MIAMI-DADE State of Florida has name FERMIN PEREZ located at 1256 MILAN AVE., CORAL GABLES, FL. as its agent to accept service of process within the State of Florida.*

*Mailing address is: 1256 MILAN AVE  
CORAL GABLES, FL. 33134*

**ACKNOWLEDGMENT**

*Having been name to accept service of process for the above mentioned corporation, at the place designated in this Certificate, I hereby am familiar with and accept the duties and responsibilities as register agent for said corporation and agree to act in this capacity, and further agree to comply with the provisions of all Statutes relative to the proper and complete performance of my duties.*

*Dated this 22<sup>nd</sup> day of July, 1999*

  
\_\_\_\_\_  
**FERMIN PEREZ  
REGISTER AGENT**

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