P99000085334

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

400002995954--7 -09/24/99--01031--003 *****78.75 *****78.75

SUBJECT:	TValle + Tourism (Proposed corporate name - mu	2
SUBJECT:		_

Enclosed is an origin	al and one(1) copy of the article	es of incorporation and a o	check for:	
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL COP	□ \$87.50 Filing Fee, Certified Copy & Certificate of Status Y REQUIRED	
FROM: Patrice B. Lehmann Name (Printed or typed)				
254 River Drive				
Tequesta F. 33469 City, State & Zip				
56/-575-0249 Daytime Telephone number				
FAX 561-575-1839				

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

FILED

1999 SEP 24 PH 2: 41

SECRETARY OF STATE
AND ASSECT FILED

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.

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ARTICLE I

SECRETARY OF STATE TALLAHASSEE, FLORIDA

The name of the corporation shall be:

Travel + Tourism Marketing

ARTICLE II PRINCIPAL OFFICE

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

ARTICLE III SHARES

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

1000

INITIAL REGISTERED AGENT AND STREET ADDRESS

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

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

rice B. Lehmann

(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