PAGE TRANSMITTAL LETTER

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

900003014208---9 -10/14/99--01026--009 *****78.75 *****78.75

		se of Orlando, Inc.	
Enclosed is an origin for : \$70.00 Filing Fee	ai and one (1) c XX \$78.75 Filing Fee & Certificate	opy of the articles of incorporation \$122.50 \$131.25 Filing Fee Filing Fee, & Certified Copy & Certificate Additional Copy Required	and a check
FROM:	Name 3956 Town Orlando,	tto & Associates, Inc. (printed or typed) Center Blvd., #165 Address FL 32837 ity, State & Zip	FILED 99 OCT 14 PH 4: 42 SECRETARY OF STATE TALLAHASSEE, FLOPHE
	(407) 24: Daytim	8-9877 a Telephone number	AUTHORIZATION BY PHONE TO CORRECT ACT

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

19,01

ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

NLT Guest Enterprise of Orlando, Inc

ARTICLE II PRINCIPAL OFFICE

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

1632 Nestlewood Trail Orlando, FL 32837

ARTICLE III SHARES

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

100

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and address of the initial registered agent is:

Philippa S. Liddell 1632 Nestlewood Trail Orlando, FL 32837

INCORPORATOR(S)

See instructions for officers/directors

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Philippa S. Liddell 1632 Nestlewood Trail Orlando, FL 32837

The un	dersigned in	corporator(s) has(hav	e) executed these Art	icies of incorporation un
7	day of	October	, 19 ⁹⁹	. •
(An add	itional artic	e must be added if ar	effective date is requ	nested.)
		and whose I xx	dell.	·
	_	The standard Control	Signature	
		· ·	Signature	
	en de la companya de		Signature	

Notarization is not required

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

CERTIFICATE OF DESIGNATION OF 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.

The name and	address of the registered agent and office is:	7.5 9 <u>5</u>
	Philippa S. Liddell	ALL A
	(NAME)	一
	1632 Nestlewood Trail	HA I
	(P.O. Box or Mail Drop Box NOT ACCEPTABLE)	70
	Orlando, FL 32837	
	(CITY/STATE/ZIP)	
	•	
ng been na	med as registered agent and to accept service of proce e place designated in this certificate, I hereby accept the a	ess for the above state

October 7, 1999

(DATE)