

TRANSMITTAL LETTER

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

P 99000097353

SUBJECT: Timber Island Resort Inc.  
(Proposed corporate name - must include suffix)

900003035909--6  
-11/05/99--01003--018  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

Enclosed is an original and one(1) copy of the articles 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

FROM: Timber Island Resort Inc.  
Name (Printed or typed)

PO Box 613  
Address

Carradelle FL 32322  
City, State & Zip

850 697 -8700  
Daytime Telephone number

RECEIVED  
99 NOV -4 PM 4:40  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

39 NOV -4 PM 4:40  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

APPROVED  
AND  
FILED

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

R/V 11/4

## 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.

### ARTICLE I NAME

The name of the corporation shall be: Timber Island Resort Inc.

### ARTICLE II PRINCIPAL OFFICE

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

PO Box 613  
Corabelle FL 32322

### ARTICLE III SHARES

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

1000. - one thousand

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Dell Schneider  
Timber Island Rd.  
Corabelle FL 32322

### ARTICLE V INCORPORATOR

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

Dell Schneider  
PO Box 613 Corabelle FL 32322

Dell Schneider

Signature/Incorporator

Nov 4 1989

Date

(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

Dell Schneider

Signature/Registered Agent

Nov 4 1989

Date

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

99 NOV -4 PM 4:40

APPROVED  
AND  
FILED