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To:

Division of Corporations
Fax Number : (850) 205-0381

From:

Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305) 634-3694
Fax Number : (305) 633-9696

FLORIDA PROFIT CORPORATION OR P.A.

south florida dynamics inc.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION

OF

SOUTH FLORIDA DYNAMICS INC.

The undersigned incorporator(s), for the purpose of forming a Not for Profit Corporation under Chapter 617 of the Florida Statutes, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I

The name of the corporation shall be: SOUTH FLORIDA DYNAMICS INC.

ARTICLE II

The principal place of business and the mailing address of this corporation shall be: 535 NW 4TH AVENUE, DELRAY BEACH, FL 33444.

ARTICLE III

The specific purpose for which the corporation is organized: TWIRLING BATON CORP.

ARTICLE IV

The manner in which the directors are elected or appointed shall be stated in the bylaws.

ARTICLE V

The name and street address of the initial registered agent shall be: JEANNE CHWALIK, 535 NW 4TH AVENUE, DELRAY BEACH, FL 33444.

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ARTICLE VI

The name and address of the officers shall be:

PRESIDENT

JEANNE CHWALIK

535 NW 4TH AVENUE
DELRAY BEACH, FL 33444

VICE-PRES

JILL BROWN

3919 FRANCES DRIVE
DELRAY BEACH, FL 33445

TREASURER

YVONNE FREAR

8170 ROSEMARIE AVENUE WEST
DELRAY BEACH, FL 33437

ARTICLE VII

The name and street address of the incorporator of these Articles of Incorporation shall be:

EMPIRE CORPORATE KIT OF AMERICA, INC.
2444 N.W. 7TH PLACE
MIAMI, FL 33127

The undersigned incorporator has executed these Articles of Incorporation
this 9th Day of APRIL, 2004.


INCORPORATOR

Ray Stomont Signing for
Empire Corporate Kit of America, Inc.

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**CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE**

South Florida Dynamics Inc.
(Name of Corporation)

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THE ARTICLES OF INCORPORATION, 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.

Jeanne R Chwalik
REGISTERED AGENT
Jeanne Chwalik

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