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Florida Department of State
Division of Corporations
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Email Address: Michael.Marsh@akerman.com

FLORIDA PROFIT/NON PROFIT CORPORATION
SUNRISE SOCCER CLUB CORPORATION

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$78.75

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DIVISION OF CORPORATIONS

T. Suresh AUG 23, 2010

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**ARTICLES OF INCORPORATION
OF
SUNRISE SOCCER CLUB CORPORATION**

The undersigned incorporator, for the purpose of forming a corporation under the Florida Not For Profit Corporation Act, hereby adopt(s) the following Articles of Incorporation:

ARTICLE I. NAME

The name of the corporation shall be: Sunrise Soccer Club Corporation.

ARTICLE II. PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation is: 11400 N.W. 18th Street, Plantation, Florida 33323.

ARTICLE III. PURPOSE(S)

The purpose for which the corporation is organized is to provide a soccer club for children and to transact any lawful business.

ARTICLE IV. MANNER OF ELECTION OF DIRECTORS

The manner in which the directors are elected or appointed is set forth in the By Laws.

ARTICLE V. INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Michael Marsh
One S.E. Third Avenue, 25th Floor
Miami, Florida 33131


ARTICLE VI. INCORPORATOR

The name and address of the Incorporator to these Articles of Incorporation:

Michael Marsh
c/o Akerman Senterfitt
One S.E. Third Avenue, 25th Floor
Miami, Florida 33131

ARTICLES VII. EFFECTIVE DATE

The Effective Date of the filing of the Corporation shall be August 20, 2010.


Michael Marsh, Incorporator

8-20-10
Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

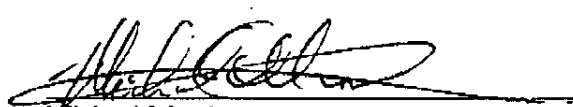
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Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree 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.


Michael Marsh

8-20-10
Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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