POODOO19525

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

200003141362--- 007 -02/21/00--01097--007 *****87.50 *****87.50

SUBJECT: 2000 Unlimited International Corporation
(Proposed corporate name - must include suffix)

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

\$70.00

\$78.75

Filing Fee

Filing Fee

& Certificate of Status

\$78.75

\$87.50

Filing Fee

Filing Fee,

& Certified Copy

Certified Copy

& Certificate of

Status

ADDITIONAL COPY REQUIRED

FROM: Jeannene Johnson & Alix Brun Name (Printed or typed)	TALL SEC
3205 32 nd Way Address	FILE 00 FEB 21 F SECRETARY O ALLAHASSEE
West Palm Beach, FL. 33407 City, State & Zip	PM 12: 16 OF STATE E. FLORIDA
561-686-7963	

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

Daytime Telephone number

ARTICLES OF INCORPORATION

FILED The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation. 00 FEB 21 PM 12: 16 SECRETARY OF STATE NAME The name of the corporation shall be: 2000 Unlimited International PRINCIPAL OFFICE The principal place of business and mailing address of this corporation shall be: 3205 32 nd Way West Palm Beach, FL 33407 ARTICLE III SHARES The number of shares of stock that this corporation is authorized to have outstanding at any one time is: /OOO one thousand INITIAL REGISTERED AGENT AND STREET ADDRESS The name and Florida street address of the initial registered agent are: West Palm Beach, FC Jeannene Johnson , 3205 32nd may, INCORPORATOR The name and address of the incorporator to these Articles of Incorporation are: Jeannene Johnson Signature/Incorporator

(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 obligations 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

Date