

TRANSMITTAL LETTER

P000000037791

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

FILED  
00 APR 10 PM 3:05  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

SUBJECT: ERGONOMIC RELIEF, INC.  
(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 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: Lars K. Soreide  
Name (Printed or typed)

195. Alexander Palm Road  
Address

Boca Raton, Florida 33432  
City, State & Zip

561-416-6971  
Daytime Telephone number

900003202109--0  
-04/10/00--01142--008  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

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

S. Thompson APR 14 2000

# ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

## ARTICLE I NAME

The name of the corporation shall be:  
ERGONOMIC RELIEF, INC.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:  
20283 State Road 7, Suite 300  
Boca Raton, Florida 33498

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Sales of ergonomic designed products over the internet

## ARTICLE IV SHARES

The number of shares of stock is:  
1000 Par Value \$.01/per share

## ARTICLE V INITIAL OFFICERS/DIRECTORS

The name(s) and address(es):

See Addendum A Attachement

## ARTICLE VI REGISTERED AGENT

The name and Florida street address registered agent are:

Arne M. Soreide  
195 Alexander Palm Road,  
Boca Raton, Fl. 33432

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator are:

Lars K. Soreide  
195 Alexander Palm Road  
Boca Raton, Fl. 33432

\*\*\*\*\*  
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.

Signature/Registered Agent Arne M. Soreide

Signature/Incorporator Lars K. Soreide

FILED  
00 APR 10 PM 3:05  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

4/7/00  
Date  
4/7/06  
Date

**ADDENDUM "A"**  
**LIST OF OFFICERS**  
**ERGONOMIC RELIEF, INC.**

**PRESIDENT/DIRECTOR**

**John Kemp**

20283 State Rd. 7, Ste. 300, Boca Raton, Fl. 33498

**VICE PRESIDENT/DIRECTOR**

**Jordan Chase Soblick**

**20283 State Rd. 7, Ste. 300, Boca Raton, Fl. 33498**

**SECRETARY/TREASURER/DIRECTOR**

Lars Kristian Soreide

20283 State Rd. 7, Ste. 300, Boca Raton, Fl. 33498