PA00000 714 84

PLEASE SOND COPY OF

ARTICLES OF INCORPORATION TO

80000333508---E -07/24/00--01113--004 ******70.00 ******70.00

LIMITLESS INC PO BOX 551465 FT LAW , PZ 33355

OD JUL 24 AM 8: 35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

THANK YOU

Domy M. Kowalesti

ARTICLES OF INCORPORATION

(Print [capital letters, in black ink] or type all inserts except

signature)

The name of the Corporation sh	all box	,	经经	5	
1 •	arr be:				
LIMITLESS INC.			<u> </u>	ထု	
				ယ္	
ARTICLE II - CORPORATE POWERS:			_		
The Corporation is organized fany and all business, for	or the p	urpose of	trar	sact	ing
organized in the State of Flor		corporat	cion	may	r pe
ARTICLE III - CAPITAL STOCK:					
The authorized capital stock	of the	Corporatio	n s	hall	be
5,000 shares of common stock.	with a n	ם מולפט מב	.F C1	OΩ	202
share. The Corporation plans reserving the balance for subs	to initia. equent is:	Lly issue suance.	500	shar	es,
		,			
ARTICLE IV - INCORPORATOR/DIRECTOR/ IN WITNESS WHEREOF, this is t	REGISTERE:	AGENT/AD	DRES	S:	•
incorporator, who shall also	serve as	initial d	irec	tor	hre
registered agent, hereby makes	. subscril	es. ackno	ha Fw	അഭ	and.
files these Articles of Incor	poration,	on order	to	for	n a
Corporation under the laws	of the 9	teta of E	Inmi	.a.	
corporation under the laws hereby accepts designation as	of the S a register	tate of F ed agent.	lori	da,	and
corporation under the laws hereby accepts designation as	of the S a register	State of F ed agent.	lori	da,	and
nereby accepts designation as	of the S a register	State of F ed agent.	lori	da,	and
nereby accepts designation as	a registe:	State of F ed agent.	lori	da,	and
nereby accepts designation as	a register	ed agent.		da,	and
NAME	a register ADDRESS	State of Fred agent. SAYVIEW Address)	CIR	da,	and
NAME ouglish (Signature)	ADDRESS 1209 (Street	SAYVIEW Address)	CIR	cce	and
NAME NAME (Signature) Amy M. Kowaliski	ADDRESS 1209 (Street	SAYVIEW Address)	CIR	cce	and
NAME Wallsh	ADDRESS 1209 (Street	ed agent. BAYVIEW	CIR	cce	and
NAME NAME (Signature) Amy M. Kowaliski	ADDRESS 1209 (Street	SAYVIEW Address)	CIR	cce	and
NAME NAME (Signature) Amy M. Kowaliski	ADDRESS 1209 ((Street) WESTON	SAYVIEW Address) J. FZ&RII State, Zi	CIR	cce	and
NAME NAME (Signature) Amy W. Kowaltski (Name) STATE OF FLORIDA 1	ADDRESS 1209 (Street WESTOM (City, WESTOM (City,	SAYVIEW Address) J. FZ&RII State, Zii	CIR	cce	and
NAME NAME (Signature) Amy M. Kowaltski (Name) STATE OF FLORIDA COUNTY OF DADE 1	ADDRESS 1209 (Street WESTOM (City, MY 60M	SAYVIEW Address) State, Zi	CIR	cce	and
NAME NAME (Signature) Amy W. Kowaltski (Name) STATE OF FLORIDA 1	ADDRESS 1209 (Street WESTOM (City, MY 60M	SAYVIEW Address) J. FZ&RII State, Zii	CIR DA D'CO	cce	and
NAME NAME (Signature) (Signature) (Name) STATE OF FLORIDA COUNTY OF DADE SWORN TO AND SUBSCRIBED before	ADDRESS 1209 (Street WESTOM (City, MY 60M	SAYVIEW Address) State, Zi	CIR DA D'CO	333 de)	2 <i>(q</i>
NAME NAME (Signature) (Signature) (Name) STATE OF FLORIDA COUNTY OF DADE SWORN TO AND SUBSCRIBED before	ADDRESS 1209 (Street WSTOM (City, MY COM EXTERNATION AND J. (SAYVIEW Address) State, Zi	CIR DA D Con	333 de)	2.(q