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Transmittal Letter

SECRETARY OF STATE TALLAHASSEE, FLORIDA

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

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SUBJECT:	Waveslicer	Powerboot	Distributors,	Inc.	
(Proposed corporate name - must include suffix)					

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

q\$70.00 Filing Fee

q\$78.75 Filing Fee & Certificate q\$122.50 Filing fee

& Certified Copy

q\$131.25_ Filing fee,

Certified Copy,
& Certificate

Additional Copy Required

FROM: Kenneth Nass

Name (printed or typed)

301 W Platt St

Address

Tampa F (33666

City, State & Zip

813 - 391-3111

Daytime Telephone Number

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



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Articles of Incorporation

SECRETARY OF STATE TALLAHASSEE, FLORIDA

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I: NAME

The name of the corp		N-1-1	~	-
Waveslicer	Powerboot	Distributors	Inc	
Δ	RTICLE II: PRIN	CIPAL OFFICE		
The principal place of			s cornorati	on shall he
301 W. Plat		ining address of this	Corporati	
Tamoa Fl	33606		,	
- 14Mpa / 111.				
	ARTICLE III:	SHARES		
The number of share		-	_	nave
outstanding at any or	ne time is: <u>Ten</u>	. Thousand	(i0,000)	
ARTICLE IV: INITIAL	DECISTEDED	ACENT AND ST	DEET AD	DDECC
The name and addre		·		_
Michael G		~		= - - -
				
T- 0- El	33/50	· · · · · · · · · · · · · · · · · · ·		-
1ampa (1)	22606			
AF	RTICLE V: INCO	RPORATOR(S)		
See instructions for o	fficers/directors.			<u> </u>
The name(s) and stre	eet addresses of th	e incorporator(s) to	these Art	icles of
Incorporation is (are):				_
Kenneth	Nass			
301 W. Pla				
Tampa F	1. 33606			 _ <u>-</u>

The undersigned incorporator(s) has (have) executed these Articles of Inco	orporation this
157 day of February, 2001.	
(An additional article must be added if an effective date is requested.)	
Signature	<u>-</u>
Signature	· <u>=</u>
Signature	
Notarization is not required.	
Note: Affixing an officer title after a signature of an incorporator does not the designation of officers.	ot constitute
Filing Fee \$70.00	SE SE

Certificate of Designation of Registered Agent/Registered Office

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The nar	ne or i	ne corpo	ration is,		_		. 1 ,	
	Wa	veslic	er le	werb	oat	1)15	ributors	3 In
	•							
2. The nar	ne and	d address	of the re	egistered	d agent	and of	ffice is:	
								=
		Micel	SEL	4L	155	OL	FL. 33	
	_			(Name	<u>.</u>			<u> </u>
	701	WEST	PLAT	50.	TAM	K.	FL. 33	606
7		(P.O. Bo	x or Mail	Drop Bo	X NOT	Accep	otable)	
_								
_			(C	ity/State	/Zin)			_

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 refisitered agent.

(Signature)

//23 /0/ (Date)

DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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SECRETARY OF STATE