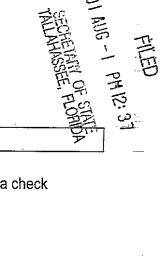
# P01000076528

#### TRANSMITTAL LETTER

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



Subject. The Incorporation

Strikers Paradise, Inc.

Enclosed is an original and One (1) copy of the articles of incorporation and a check

\$70.00 Filing Fee
\$78.75 Filing Fee & Certificate
\$122.50 Filing Fee & Certified Copy
\$131.25 Filing Fee, Certified Copy and

90(1004510909--8 -08/01/01--01042--001 \*\*\*\*\*78.75 \*\*\*\*\*\*78.75

From:

Phillip Atkinson

2190 SW 37 Terrace

Ft Lauderdale

954-583-2482

NOTE: Please provide the original and one copy of the

## Articles of Incorporation Of

Ot	
Strikers Paradise, Inc.	
The undersigned incorporator(s), for the purpose of forming a corporation under the Floric Corporation Act, hereby adopt(s) the following Articles of Incorporation,	la Betsim
Article I - Name	LLAHASSEE, PLONG
The name of the corporation shall Strikers Paradise, Inc.	7.5
Article II - Principal Office	Ę
The principal place of business and mailing address of this corporation shall be:	
Business Address:	
Address: 8500 NW 44 Street	
City: Sunrise	
State: <b>FL</b> Zip: <b>33351</b>	
Mailing Address:	
Address: 2190 SW 37 Terrace	
City: Ft Lauderdale	
State: Ft Lauderdale Zip: 33312	
Article III - Shares of Company Stock	
The number of shares of stock that this corporation is authorized to issue is,	
1000 Shares, No par value.	
Article IV - Initial Registered Agent and Street Address	
The name and address of the initial registered agent is:	
Name: Phillip Atkinson	
Address: 2190 SW 37 Terrace	
City: Ft Lauderdale	

Zip: 33312

State: FL

### Article V - Incorporator(s)

The name(s) and street address (es) of the incorporator(s) to these Articles of Incorporation is (are):

Name: Phillip A	tkinson	Name:		
Address: 2190 SW 37 Terrace		Address:		
City: Ft Laudero	lale			
State: FL	Zip: <b>33312</b>		Zip:	
Name:		Name:		
State:	Zip:			
The undersign  30th	Allum Signature	cuted these Articles of Incorp		
	Signature		tau in 199 <del>4</del> di	2 <u>2</u> 2 2.
	Signature	<del></del>		· <del></del> :
<del></del>	Signature	4	-	***

### CERTIFICATE OF DESIGNATION OF **REGISTERED AGENT / REGISTERED OFFICE**

PRESENT TO THE PROVISIONS OF SECTION 607.0501 OR 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING THE REGISTERED OFFICE / REGISTERED AGENT, IN THE STATE OF

1. The name of the corporation	Strikers Paradise, Inc.		e ".	<u>+</u> .
2. The name and address of the	e registered agent and			
Name: Phillip Atkinson			2	
Address: 2190 SW 37 Terrace			AUG -	-71.
City: Ft Lauc	SSE C		門凹	
State: <b>FL</b>	Zip: <b>33312</b>	FLONI STAI	PH 12: 37	
laving been named as registered bove stated corporation at the p	d agent and to accept service of process for the lace designated in this certificate, I hereby acc	e ept	<u> </u>	

Н а 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.

7/30/01 Date

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

Designation of Registered Agent Fee \$35.00