

POLO00078757^{Form 1}

TRANSMITTAL LETTER

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

SUBJECT: VISION ON INC.

(Proposed corporate name - must include suffix)

500004518596--8

-08/06/01--01035--004

*****78.75 *****78.75

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

\$122.50
Filing Fee
& Certified Copy

\$131.25
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM: Mark Norman

Name (Printed or typed)

700 West Airport Drive

Address

Sebastian Florida 32958

City, State & Zip

1 888 855 JUMP

Daytime Telephone number

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

AB 7-10-01

ARTICLES OF INCORPORATION

of

VISION ON, INC

(name of corporation)

The undersigned acting as the incorporators of a corporation under the Florida Business Corporation Act, adopt(s) the following articles of incorporation for such corporation:

ARTICLE I - CORPORATE NAME

The name of the corporation is:

VISION ON, INC

ARTICLE II - DURATION

This corporation shall exist perpetually unless dissolved according to Florida law.

ARTICLE III - PURPOSE

The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida.

ARTICLE IV - CAPITAL STOCK

The corporation is authorized to issue 500 shares of common stock, par value \$ 0.10 per share.

ARTICLE V - INITIAL PRINCIPAL OFFICE

The street address of the initial principal office and, if different, the mailing address is:

STREET ADDRESS 400 WEST AIRPORT DRWE

CITY SEBASTIAN FLORIDA FL ZIP 32958

Mailing address, if different

STREET ADDRESS AS ABOVE

CITY FLORIDA ZIP

ARTICLE VI - INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office and the name of the initial registered agent at the office is:

NAME MARK NORMAN

ADDRESS 400 WEST AIRPORT DRWE

CITY SEBASTIAN FLORIDA FL ZIP 32958

ARTICLE VII - INITIAL BOARD OF DIRECTORS

This corporation shall have ONE (1) directors initially. The number of directors may be either increased or diminished from time to time by the By-Laws, but shall never be less than one (1). The names and addresses of the initial director(s) of the corporation are as follows:

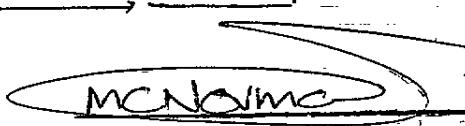
NAME	MARK NORMAN	
ADDRESS	400 WEST AIRPORT DRIVE	
CITY	SEBASTIAN	STATE FL ZIP 32958
NAME		
ADDRESS		
CITY	STATE	ZIP
NAME		
ADDRESS		
CITY	STATE	ZIP

ARTICLE VIII - INCORPORATORS

The names and addresses of the incorporators signing these Articles of Incorporation are as follows:

NAME	MARK NORMAN	
ADDRESS	400 WEST AIRPORT DRIVE	
CITY	SEBASTIAN	STATE FL ZIP 32958
NAME		
ADDRESS		
CITY	STATE	ZIP
NAME		
ADDRESS		
CITY	STATE	ZIP

The undersigned incorporator(s) have executed these Articles of Incorporation this 17TH day of JULY 2001



(Signature)



(Signature)



(Signature)

CERTIFICATE OF DESIGNATION
REGISTERED AGENT/ REGISTERED OFFICE

VISION ON, INC

(name of corporation)

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted:

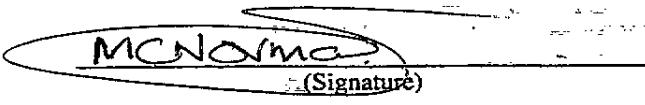
The above corporation, organized under the laws of the State of Florida with its registered office as indicated in the Articles of Incorporation

at 400 WEST AIRPORT DRIVE
SEBASTIAN FLORIDA 32958.

has named MARK NORMAN.

located at the aforesaid address, as its registered agent to accept service of process within this state.

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.


MCNorman
(Signature)

17TH - JULY - 2001
(Date)