

Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number

: (850)205-0361

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number : 072450003255 Phone : (305)634-3694 Fax Number : (305)633-9696

ARY OF STATE
96

FLORIDA PROFIT CORPORATION OR P.A.

dive.com, inc.

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78,75

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(PRINT [capital letters in black ink] or type)

ARTICLE I - CORPORATE NAME:

The name of the Corporation shall be:

DIVE COM, INC.

ARTICLE II - CORPORATE POWERS:

The Corporation is organized for the purpose of transacting any and all business, for which a corporation may be organized in the State of Florida.

(Profession, if a P.A.: (

ARTICLE III - CAPITAL STOCK:

The authorized capital stock of the Corporation shall he 5,000 shares of common stock, with a par value of \$1 per The Corporation plans to initially issue 1:000 shares, reserving the balance for subsequent issuance.

ARTICLE IV - INCORPORATOR/DIRECTOR/REGISTERED AGENT/ADDRESS

/PRINCIPAL ADDRESS:
IN WITNESS WHEREOF, this is to certify that the undersigned incorporator, who shall also serve as initial director and registered agent, hereby makes, subscribes, acknowledges and files these Articles of Incorporation, in order to form a corporation under the laws of the State of Florida, and hereby accepts designation as registered agent.

ADDRESS 14405 SW 149 TER (STREET address) <u>MIAMI FL 33186</u> (City, State, Zip) (Name)

STATE OF FLORIDA

COUNTY OF Broward

SWORN TO AND SUBSCRIBED before me, this 5 day of Accomba 2002.

Prepared by Martin R. Rappaport CPA PA 4300 N University Dr. B-102 Lauderhill FL 33351 (954)572-6006



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CERTIFICATE DESIGNATING (OR CHANGING) PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN THIS STATE, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED.

In pursuance of Chapter 607,34 Florida Statutes, the following is submitted, in compliance with said Act: First-That <u>Dive.Com. Inc.</u> desiring to organize under the laws of the State of Florida with its principal office, as indicated in the articles of incorporation at City of ___Miami ____, County of <u>Dade</u>, State of Florida has named <u>Charles F. Young</u> <u> located at </u> _____, County of Dade, 14405 SW 149 Ter. City of Miami State of Florida, as its agent to accept service of process: within. ACKNOWLEDGEMENT: (MUST BE SIGNED BY DESIGNATED AGENT) Having been named to accept service of process for the above stated corporation, at place designated in this certificate. hereby accept to act in this capacity, and agree to comply with the provision of said Act relative to keeping open said of the

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