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SECRETARY OF STATE

Job

DATE

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

, ;	
	Re:
Gen	tlemen:
Enc	losed please find the original and one copy of the Articles of Incorporation, together with my ck in the amount of \$78.75
	represents the cost of the Filing Fees, Certified Copy of Articles of Incorporation and Fee for istered Agent Designation for the above named corporation.
	Very truly yours.
	· Selle
	DEVOILON DIDER (Individual's Name)
	JETXTREM, INC. (Name of Corporation)
	MAILING ADDRESS OF CORPORATION
	4999 SPIRAL WAY
	ST CLOUD FL 34771
	PHONE
	(407) 973 8737

Number

Area Code

ARTICLES OF INCORPORATION

of

TETYTREM. INC.	
OBJECTION:	
(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	03 FE SECR TALLA
The name of the corporation is:	JETXTREM, INC.	FIL B 27 HETAR) HASS
		PH 12: PF S
	ARTICLE II - DURATION	: 26 TATI
This corporation shall exist perpetua	ally unless dissolved according to Florida law.	2111

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 \$ __1.00 ___ per share.

ARTICLE V - INITIAL PRINCIPAL OFFICE

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

CITY	ST CLOUD	FLORIDA	ZIP 34771
Mailing address, if dif	ferent		
STREET ADDRESS			

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	DEVOILON DIDIE	3	
ADDRESS	4999 SPIRAL WAY	· · · · · ·	
CITY	ST CLOUD	FLORIDA	ZIP 34771

NAME	DIDIER DEVOILON		
ADDRESS	4999 SPIRAL WAY		
CITY	ST CLOUD	STATE FL	ZIP 34771
NAME			
ADDRESS			
CITY		STATE	- ZIP
NAME			
ADDRESS			
CITY		STATE	ZIP
	ARTICLE Values of the incorporators signing the DIDIER DEVOILON	viii - incorporation	
	dresses of the incorporators signing the		
NAME	dresses of the incorporators signing the		
NAME ADDRESS	dresses of the incorporators signing the DIDIER DEVOILON 4999 SPIRAL WAY	ese Articles of Incorporation	on are as follows:
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NAME ADDRESS CITY NAME ADDRESS CITY NAME ADDRESS CITY CITY	dresses of the incorporators signing the DIDIER DEVOILON 4999 SPIRAL WAY	STATE STATE STATE	ZIP 34771 ZIP ZIP

_ (Signature)

CERTIFICATE OF DESIGNATION REGISTERED AGENT/ REGISTERED OFFICE

JETXTREM, INC. (name of corporation)	SECRETARY OF STATE TALLAHASSEE, FLORIO
);
Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following	r ic culmittad
The above corporation, organized under the laws of the State of Florida	
as indicated in the Articles of Incorporation	with his registered office
at 4999 SPIRAL WAY	
ST CLOUD FL 34771	
has named <u>DIDIER DEVOILON</u>	
located at the aforesaid address, as its registered agent to accept service of	of process within this
state.	•
Having been named as registered agent and to accept service of process	
corporation at the place designated in this certificate, I hereby accept the	
tered agent and agree to act in this capacity. I further agree to comply wi statutes relating to the proper and complete performance of my duties, an	-
and accept the obligations of my position as registered agent.	id I am familiai with
and accept the congations of my position as registered agent.	
	02/25/03
	Date)