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TRANSMITTAL LETTER

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

SUBJECT:	Pass Hockey USA, Inc. (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the articles of incorporation and a check for:
□ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status \$78.75 Filing Fee & Certified Copy & Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED
FROM:	Erik S. Stamell Name (Printed or typed)
· -	4000 Town Center, Suite 1500 Address
	Southfield, Michigan 48075 City, State & Zip
	(248) 358–2090 Daytime Telephone number
	~ 2) cities a state incite interior

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

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

Pass Hockey USA, Inc.

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

60-8 Bristol Road East, Suite 227 Mississauga, ON L4Z 3K8

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

to organize, develop, and operate hockey camps.

ARTICLE IV SHARES

The number of shares of stock is:

200 shares of stock have been issued.

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

President, Treasurer, and Director is William K. Brothers Vice President, Secretary, and Director is Santina E. Brothers 60-8 Bristol Road East, Suite 227 Mississauga, ON L4Z 3K8

ARTICLE VI REGISTERED AGENT

The <u>name and Florida street address</u> of the registered agent is:

CT Corporation 1200 S. Pine Island, Suite 250 Plantation, FL 33324

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

Erik S. Stamell 4000 Town Center, Suite 1500 Southfield, MI 48075

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Signature/Registered Agent Asst. Secretary

Signature/Incorporator Claudia L. Saari Asst. Secretary

Date

Date