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(Requestor's Name)

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(Address)

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(Address)

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(City/State/Zip/Phone #)

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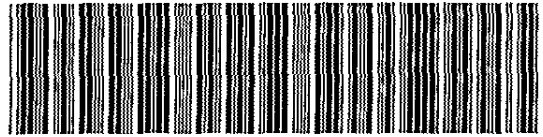
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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## TRANSMITTAL LETTER

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

**SUBJECT:** OMNITONIC SPORT INC.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original 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

☐ \$87.50  
Filing Fee,  
Certified Copy  
& Certificate of  
Status

**ADDITIONAL COPY REQUIRED**

**FROM:** OMNITONIC SPORT

Name (Printed or typed)

634 INDIGO AVE WELLINGTON

Address

FLORIDA WEST PALM BEACH FLORIDA 33414 - 8175

City, State & Zip

(561) 792-1335

Daytime Telephone number

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**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:  
OMNITONIC SPORT INC.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:  
634 INDIGO AVE  
WELLINGTON FL.33414

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

- (1 ) To transactinany and all lawful business permitted under the law of the state of Florida.
- ( 2 )To increased employment opportunities for our youths age 18 and up without any distinction of race or gender

## ARTICLE IV SHARES

The number of shares of stock is:

THE NUMBER OF SHARES OF STOCK SHALL BE 500 at \$1.00 par value common stock,which shall be designated as common shares. All of said stock shall be payable in cash, property (real or personal or labor labor or services in lieu thereof at a just valuation to be fixed by board of directors

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

THE NAMES OF THE PERSONS WHO SHALL SERVE AS OFFICERS OF THE CORPORATION UNTIL THE FIRST MEETING OF THE BOARD OF DIRECTORS and the shareholders ARE  
WILFRID LAZARRE 634 INDIGO AVE WELLINGTON FL33414 PRESIDENT  
MARCIA D. LAZARRE 634 INDIGO AVE WELLINGTON FL.33414 TREASURER

## ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

WILFRID LAZARRE  
634 INDIGO AVE WELLINGTON FL,33414

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Wilfrid Lazarre 634 Indiga Ave.  
wellington Fl,33414

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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

04/23/04

Date

  
Signature/Incorporator

04/23/04

Date