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CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

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	Art of Inc. File
	LTD Partnership File
	Foreign Corp. File
	L.C. File
	Fictitious Name File
	Trade/Service Mark
	Merger File
	Art. of Amend. File
	RA Resignation
	Dissolution / Withdrawal
	Annual Report / Reinstatement
	Cert. Copy
	Photo Copy
	Certificate of Good Standing
	Certificate of Status
	Certificate of Fictitious Name
	Corp Record Search
	Officer Search
	Fictitious Search
Signature	Fictitious Owner Search
Signature	Vehicle Search
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ARTICLES OF INCORPORATION OF AIRBORNE SKATE SHOP ENTERPRISES, INC.

THE UNDERSIGNED SUBSCRIBER (s) TO THESE ARTICLES OF INCORPORATION, NATURAL PERSON (s) COMPETENT TO CONTRACT, HEREBY FORM A CORPORATION UNDER THE LAWS OF THE STATE OF FLORIDA.

ARTICLE 1 - CORPORATE NAME

THE NAME OF THE CORPORATE IS: <u>AIRBORNE SKATE SHOP ENTERPRISES</u>, <u>INC.</u>
THE PRINCIPLE MAILING ADDRESS OF CORPORATION IS; 6361 SW 26th STREET MIAMI, FL 33155

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 CORPORTATION IS AUTHORIZED TO ISSUE (five hundred) SHARES

(_500____) OF (one) DOLLAR (s) (\$_1.00____) PAR VALUE COMMON STOCK, WHICH SHALL

BE DESIGNATED "COMMON STOCK"

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ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT

THE NAME AND ADDR NAME: ANNETTE ME		REGISTERED AG	SENT OF THIS CORPORATION IS:		
PRINCIPLE AND MAIL	ING ADDRESS: <u>6361 S</u>	W 26th STREET			
CITY: MIAMI	FLORIDA	ZIP 33155			
	ARTICLE VI- INI	TIAL BOARD (OF DIRECTORS		
THIS CORPORATION S DIRECTORS INITIALL DIMINISHED FROM THE THE NAMES AND ADD CORPORATION ARE A	Y. THE NUMBER OF E IME TO TIME BY THE RESS OF THE INITIA	IRECTORS MAY BY-LAWS, BUT S	BE INCREASED OR HALL NEVER BE LESS THAN ONE (1).		
NAME: <u>ANNETTE ME</u> PRINCIPLE AND MAIL		SW 26th STREET			
CITY: MIAMI FLOR	<u>IDA</u>	ZIP 33155			
NAME:					
PRINCIPLE AND MAILING ADDRESS:					
CITY		<u>FLORIDA</u>	<u>ZIP</u>		
	ART	ICLE VII - INC	ORPORATORS		
THE NAME AND ADDR INCORPORATION ARE		ON(s) SIGNING T	HESE ARTICLES OF		
NAME: ANNETTE ME	NDEZ				
PRINCIPLE AND MAIL	ING ADDRESS: 6361	SW 26th STREET			
CITY: <u>MIAMI</u>	<u>FLORIDA</u>		<u>ZIP 33155</u>		
NAME:					
PRINCIPLE AND MAIL	ING ADDRESS3				
CITY: _	<u>FLOI</u>	UDA	<u>ZIP</u>		

IN WITNESS WHEREOF, THE UNDERSIGNED SUBSCRIBER (s) HAVE EXECUTED THESE ARTICLES OF INCORPORATION THIS 21st DAY OFAUGUST, 2005

Omotto Mend	(SIGN)
/ 0	(SIGN)
	(SIGN)

STATE OF FLORIDA

SS

COUNTY OF DADE

BEFORE ME, A NOTARY PUBLIC AUTHORIZED TO TAKE ACKNOWLEDGEMENTS IN THE STATE AND COUNTY SET FORTH ABOVE PERSONALLY APPEARED

NAME: ANNETTE MENDEZ

(NOTARY SEAL) LINE

KNOWN TO ME AND KNOWN TO BE THE PERSON (s) WHO EXECUTED THE FOREGOING ARTICLES OF INCORPORATION, AND WHO ACKNOWLEDGE BEFORE ME THAT (HE) & (SHE) EXECUTED THESE ARTICLES OF INCORPORATION

IN WITNESS WHEREOF, I HAVE HEREUNTO AFFIXED MY HAND AND SEAL, IN THE

STATE AND COUNTY AFORESAID THIS 21" DAY OF AUGUST 2005.

LINDA L WILSON
Notary Public - State of Florida

My Commission Expires Jun 20, 200°
Commission # DD 388354
Bonded By National Notary Assn

(NOTARY PUBLIC, STATE OF FLORIDA AT LARGE)

LINDA L. WILSON MY COMMISION # DD388354 MY COMMISION EXPIRES: JANUARY 20,2009

CERTIFICATE AND ACKNOWLEDGEMENT OF REGISTERED AGENT

CERTIFICATE OF REGISTERED AGENT

OF AIRBORNE SKATE SHOP ENTERPRISES, INC. (Name of corporation)

PURSUANT TO FLORIDA STATUE SECTIONS 48.091 AND 607.304, THE FOLLOWING SUBMITTED:

THE ABOVE CORPORTATION, DESIRING TO ORGANIZE UNDER THE LAWS OF THE STATE OF FLORIDA WITH ITS REGISTERED OFFICE AS INDICATED IN THE ARTICLES OF INCORPORATION

AT: 6361 SW 26 th STREET MIAMI, FL. 33155

HAS NAMED: ANNETTE MENDEZ

LOCATED AT THE AFORESAID ADDRESS, AS ITS REGISTERED AGENT TO ACCEPT SERVICE OF PROCESS WITHIN THIS STATE.

ACKNOWLEDGEMENT

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT TO ACT IN THIS CAPACITY, AND AGREE TO COMPLY WITH THE PROVISIONS OF FLORIDA LAW IN KEEPING OPEN SAID OFFICE.

I HEREBY AM FAMILIAR WITH AND ACCEPT THE DUTIES AND RESPONSIBILITIES AS A REGISTERED AGENT.

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NETTE MENDEZ (Registered agent)