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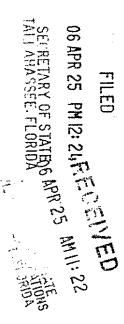
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CORPORATION NAME(S) & DOCUMEN	T NUMBER(S), (if known):
1. WARRIOR BASKET	BALL CAMP INC.
(Corporation Name)	(Document #)
2	
(Corporation Name)	(Document #)
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OTHER FILINGS	REGISTRATION/QUALIFICATION
Annual Report Fictitious Name	Foreign Limited Partnership
	Reinstatement
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FILED 06 APR 25 PM 12: 24 SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION

The undersigned Incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I - NAME

The name of the corporation shall be:

WARRIOR BASKETBALL CAMP INC.

ARTICLE II - PRINCIPAL OFFICE

The principal place of business and mailing of this corporation shall be:

WESTMINSTER CHRISTIAN SCHOOL 6855 SW 152 STREET MIAMI FL *33157*

Jim DomoRACKI 22537 SW 94 PATH MIAMI FL 33190

ARTICLE III -SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100

ARTICLES IV -INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Jim Domoracti 22537 SW 94 PATH MIAMI FL 33190

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ARTICLE V - INCORPORATOR

The name and street address of the incorporator to these Articles of Incorporation is:

Jim Domoracki 22537 SW 94 PATH MIAMI FL 33190

The undersigned incorporator has executed these Articles of Incorporation this day of 2006.

ARTICLE VI- DIRECTOR (S)

The name(s) and street address (es) of the director(s) to these Articles of Incorporation is (are):

Jim Domoracki PRESIDENT 22537 SW 94 PATH MIAMI FL 33190

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT / REGISTERED OFFICE

Having been named as Registered Agent and to accept service of process for the above stated corporation at place designated in this certificate, I hereby accept the appointment as Registered Agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes related to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as Registered Agent.

Registered Agent Signature

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