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# PRICE ADVANTAGE

Accounting & Bookkeeping Services 269 N. University Dr. Suite B Tel. (954)964-7022 Fax (954)964-7023

April 16, 2006

Secretary of State Corporation Division State of Florida Tallahassee, Fl. 32304

Re: Articles or Incorporation of: FL MARTIAL ARTS & THAI BOXING CENTER, INC

#### Gentlemen:

This is to advice you to send all information for the incorporation of, FL MARTIAL ARTS & THAI BOXING CENTER, INC to the following address:

Price Advantage 269 N. UNIVERSITY DR. SUITE B PEMBROKE PINES, FL., 33024

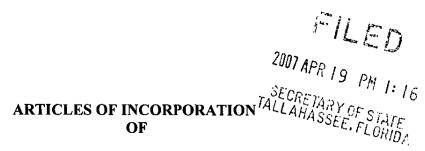
Enclosed please find copy of the articles of incorporation of FL MARTIAL ARTS & THAI BOXING CENTER, INC.. and a check in the amount of \$87.50 for the processing of this corporation. The check represents payment of the following fees:

Filling fees 35.00 Certified Copy 52.50

Total 87.50

Price Advantage

Nadin Ruiz



FL MARTIAL ARTS & THAI BOXING CENTER, INC.

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:

FL MARTIAL ARTS & THAI BOXING CENTER, INC.

#### ARTICLE II PRINCIPAL OFFICE

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

343 FAIRWAY CIRCLE WESTON, FL.,33326

### ARTICLE III CAPITAL STOCK

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

100 shares at \$1.00 par value

#### ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

NADIN RUIZ 269 N. UNIVERSITY DR. #B PEMBROKE PINES, FL., 33024

#### ARTICLE V INCORPORATORS

The names and street addresses of the incorporators to these Articles of Incorporation are:

MARK A. TRILLAS 343 FAIRWAY CIRCLE WESTON, FL., 33326

#### ARTICLE VI DIRECTORS

MARK A. TRILLAS

President

#### ARTICLE VII NATURE OF BUSINESS

The general nature of business and the objects and purposed to be transacted and carried on are to do any and all the things mentioned, as fully and to the same extend as natural persons might or could do, viz:

- a) to engage in any legal business.
- b) In the purchase or acquisition of business rights of franchises, or for additional working capital, or for any other object in or about its business affairs, and without limits as to amount, to incur debt, and to raise, borrow, and secure the payment of money in any lawful manner, including issue and sale of other disposition of bonds, warrants, debentures, obligations, negotiable and transferable instruments and evidence of all kinds, whether secured by mortgage, pledge, deed or trust otherwise.
- c) Generally to perform and make contracts of any kind and description and for the purpose of attaining any of the objects of the corporation, to do and perform any other acts or things and exercise any and all powers which a co-partnership or natural person could do and exercise, and which now are, or hereafter may be authorized by law and generally to do and perform any and all things necessary or

incident to the performing and carrying out of the powers hereinabove specifically delegated or implied.

The undersigned has executed these Articles of	Signature-Title	
	Signature- Title	
_	Signature- Title	
	Signature-Title	
	Signature-Title	

# CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 607.0501, Florida statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

- 1- The name of the Corporation is: FL MARTIAL ARTS & THAI BOXING CENTER, INC.
- 2- The name of the registered agent is:

## NADIN RUIZ 269 N. UNIVERSITY DR. STE.B PEMBROKE PINES, FL., 33024

Signature_	dur	
Title:	account for t	
Date:	3/4/07	

Having named as registered agent and to accept service of process for the above stated Corporation at the 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 relating to the proper and complete performance of my duties, and am familiar with and accept the obligations of my position as registered Agent.

Signature Oldf

SECRETARY OF STATE