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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

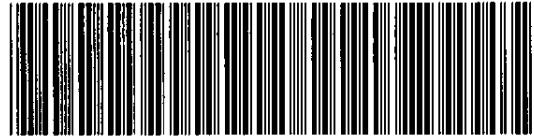
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: LEONARDO CORPORATION
(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: ANDREA ROSSI
Name (Printed or typed)

1331 LINCOLN ROAD, APT 505
Address

MIAMI BEACH, FL. 33139
City, State & Zip

✓ 603-487-5192
Daytime Telephone number

✓ JRTAXX@AOL.COM
E-mail address: (to be used for future annual report notification)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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: LEONARDO CORPORATION

ARTICLE II PRINCIPAL OFFICE

Principal street address: 1331 LINCOLN RD, APT 505 MIAMI BEACH, FL. 33139

Mailing address, if different is: SAME

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

MANUFACTURE AND SALE OF ENERGY RELATED PRODUCTS.

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: ANDREA ROSSI, PRES. Address: 1331 LINCOLN RD, APT 505 MIAMI BEACH, FL. 33139

Name and Title: ANDREA ROSSI, DIRECTOR Address: 1331 LINCOLN RD, APT 505 MIAMI BEACH, FL. 33139

Name and Title: JAMES R. TRAVIS, SECTY Address: 8 TOWN FARM ROAD NEW BOSTON, NH 03070

Name and Title: JAMES R. TRAVIS DIRECTOR Address: 8 TOWN FARM RD NEW BOSTON, NH 03070

Name and Title: Address:

Name and Title: Address:

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: ANDREA ROSSI Address: 1331 LINCOLN RD, APT 505 MIAMI BEACH, FL. 33139

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: ANDREA ROSSI Address: 1331 LINCOLN RD, APT 505 MIAMI BEACH, FL. 33139

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: Andrea Rossi, Name: ANDREA ROSSI, Date: 11/3/10

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Signature: Andrea Rossi, Name: ANDREA ROSSI, Date: 11/3/10

FILED SECRETARY OF STATE TALLAHASSEE, FLORIDA 2010 NOV - 8 A 8:36