

▼ P4500006/387

P. O. BOX 16431
PLANTATION, FL 33318-6431
JULY 08, 1995

SECRETARY OF STATE
DIVISION OF CORPORATIONS
P. O. BOX 6327
TALLAHASSEE, FLORIDA 32314

000001542070
407/200-95-11111-9-4000
*****20.00 *****20.00

GENTLEMEN:

ENCLOSED FIND ARTICLES OF INCORPORATION FOR

"XTREME ENTERPRISES, INC"

TO BECOME EFFECTIVE ON July 20, 1995, ALONG WITH A
CHECK IN THE AMOUNT OF \$70.00 TO COVER COSTS. NO
CERTIFIED COPY IS NEEDED.

PLEASE SEND COMPLETED PAPERS TO:

HERBCO AUDITING SERVICE INC
P. O. BOX 16431
PLANTATION, FLORIDA 33318-6431

SINCERELY,

Herbert B. Stenberg

HERBCO AUDITING SERVICE INC

Jerry Almstead

*Copy filed
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187-2-1926, 191
1995-10918*

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TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE

July 20, 1995

Sandra B. Mortham
Secretary of State

HERBCO AUDITING SERVICE
PO BOX 16431
PLANTATION, FL 33318-6431

SUBJECT: XTREME ENTERPRISES, INC.
Ref. Number: W95000014718

gerry almostead

We have received your document for XTREME ENTERPRISES, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of an entity name **DOES NOT** constitute a difference. Please select a new name and make the substitution in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

When the document is resubmitted, please return a copy of this letter to ensure that your document is properly handled.

If you have any questions about the availability of a particular name, please call (904) 488-9000.

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with a telephone number where you can be reached during working hours.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6919.

Beth Register
Corporate Specialist Supervisor

Letter Number: 195A00034831

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TO: [illegible]
FROM: [illegible]
SUBJECT: [illegible]

[illegible text]

James D. [illegible]

(305)

DAY # 564-545)

ARTICLES OF INCORPORATION

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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

XTREME PAINTBALL VENTURES INC.

ARTICLE II PRINCIPAL OFFICE

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

3561 XW 9TH AV
OAKLAND PK FL 33309

ARTICLE III SHARES

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

100

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

JERRY OLMSTEAD
1533 SW 19TH AV
FT LAUDERDALE FL 33312

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

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

JERRY OLINSTEAD
1533 SW 19TH AV
FT LAUD FL 33312

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

8 day of Aug, 19 95

Jerry P. Olinstead
Signature

Signature

Signature

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE

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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

XTREME PAINTBALL VENTURES INC

2 The name and address of the registered agent and office is

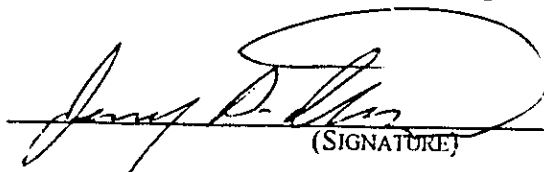
JERRY OLINSTEAD
(NAME)

1533 SW 19TH AV

(P O Box or Mail Drop Box NOT ACCEPTABLE)

FT LAUDERDALE 33312
(CITY/STATE/ZIP)

Having been 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 I am familiar with and accept the obligations of my position as registered agent.


(SIGNATURE)

Aug 8 95
(DATE)