

TRANSMITTAL LETTER

**7000021034**

Department of State  
Division of Corporations  
P.O. Box 6227  
Tallahassee, FL 32311

TO: Skydive Safari Inc.  
(Proposed corporate name - must include suffix)

700002103477--5  
-03/04/97--01044--005  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

Enclosed is an original and one (1) copy of the articles of incorporation and a check for:

\$70.00  
Filing Fee

\$78.75  
Filing Fee  
& Certificate

\$122.50  
Filing Fee  
& Certified Copy

\$131.25  
Filing Fee,  
Certified Copy  
& Certificate

Additional Copy Required

FROM: J. Adendorff  
Name (printed or typed)

400 W AIRPORT DR  
Address

Sebastian, FL 32958  
City, State & Zip

(407) 388-5672  
Daytime Telephone number

RECEIVED DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

97 MAR -4 AM 3:35

FILED

NOTE: Please provide the original and one copy of the articles.

**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:

Skydive Safari

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TALLAHASSEE FLORIDA

**ARTICLE II PRINCIPAL OFFICE**

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

400 W. AIRPORT DR  
Sebastian, FL 32958

**ARTICLE III SHARES**

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

100 Shares at \$1.00 each.

**ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS**

The name and address of the initial registered agent is:

Johan Adendorff  
400 W AIRPORT DR  
Sebastian, FL 32958

**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):


Johan Adendarff  
400 W AIRPORT DR  
Sebastian, FL 32958

Johanna KRIEFALL  
400 W AIRPORT DR  
Sebastian, FL 32958

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

17 day of Feb, 19 97.

  
\_\_\_\_\_  
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**

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: Skydive Safari INC

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

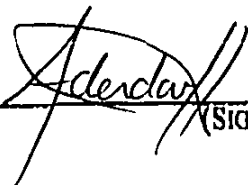
Johan Adendorff  
(NAME)

400 W AIRPORT DR  
(P.O. Box or Mail Drop Box NOT ACCEPTABLE)

Sebastian, FL 32958  
(CITY/STATE/ZIP)

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TALLAHASSEE FLORIDA

*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)

2-17-97  
(DATE)