

1589 N. E. Neimyer Circle Port St. Lucie, FL 34592 561-398-0622

March 25, 1997

Department of State Division of Corporations P. O. Box 6327 Talhassee, FL 32314

000002128880--6 -03/31/97--0133--013 *****78.75 ******78.75

Dear Sir:

Enclosed is a transmittal letter and Articles of Incorporation, together with a check for \$78.75 to cover the filing fee and certificate fee.

If possible, please send the processed certificate of incorporation to our New York address, which is P. O. Box 2308, Montauk, NY 11954. If this is not possible, the Florida address above will be fine.

Thank you for your prompt attention to this matter.

Sincerely,

Gerald S. Cass

cc:Scott Shafer

APR &

THE ED

TRANSMITTAL LETTER

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

	SUBJECT: Ro	PAM'N SPORT	is Craft, Inc te name - must include suff	īx)
	Enclosed is an original ar	nd 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 CO	PY REQUIRED
	FROM:	Gerald S. Name (Printed	CASS or typed)	
	15	89 N. E. N. Addre	seinyer Cir	<u>. (1e</u>
	Pos	t St Lucie, City, State	FL 3459	72_
Ж	Please direct,	561 398-0 Daytime Teleph I Possible, All	622 coccespond	ences to the
	,	P. O Box		

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

MONTAUK, NY 11954 516-668-6868

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:

ROAM'N Sports Craft, INC.

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ARTICLE II PRINCIPAL OFFICE

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

1589 N. E. Neimyer Circle Pt. St. Lucie, FL 34592

ARTICLE III SHARES

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

100,000 haves (par Value) \$.01

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Gerald S. CASS 1584 N.E. Neimyer Circle Port St Lucie, FL 34592

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):

Gerald S. CASS
6 SOUNDAIREN Dr.
MONTAUK, NY 11954
SS*
Michael J. Festo
881 Drienta Ave.
Mamaroneck, NY 10583
SS*
SCOTT Schafer
2325 N.E. Indian River Dr *1
Jensen Beach, FL 34957
SS * 267-77-8326

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

25 day of MACCh , 19 97.

(An additional article must be added if an effective date is requested.)

Signature
Signature

Notarization is not required

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.

	orporation is 1000 to 1000 to 1000	<u>.</u>
2. The name and add	dress of the registered agent and office is:	_
	GREALD S. CASS	
	(NAME) 1589 N.E. Deimyer Circle H. 33 (P. O. Box or Mall Drop Box NOT ACCEPTABLE)	
	Port St. Lucie FL 34592 Mg = (CITY/STATE/ZIP)	

Rossola Cooff

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.

Decald (Case 3/25/97 (Date)