

TRANSMITTAL LETTER

097000031845

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

FILED  
97 APR -1 PM 4:06  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

SUBJECT: AEROBIC LIFE MASTER PRODUCTS, INC.  
(Proposed corporate name - must include suffix)

000002134000-5  
-04/04/97--01027--020  
\*\*\*\*131.25 \*\*\*\*131.25

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

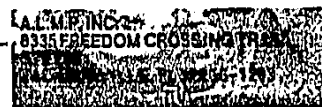
FROM: WILLIAM C. MCCUNE  
Name (Printed or typed)

8335 FREEDOM CROSSING TR. STE 202  
Address

JACKSONVILLE, FL  
City, State & Zip

904-296-8080  
Daytime Telephone number

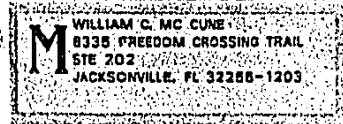
(904-943-6925)



4/11

BC 4/8

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



Florida Department of State, Sandra B. Mortham, Secretary of State

### CERTIFICATE OF DOMESTICATION

The undersigned, WILLIAM C. McCune,  
(Name) (Title)

of AEROBIC LIFE MASTER PRODUCTS, INC.  
(Corporation Name)

in accordance with Florida Statutes, section 607.1801 does hereby certify:

1. The date on which corporation was first formed was Aug 13, 1992.
2. The jurisdiction where the above named corporations was first formed, incorporated, or otherwise came into being was COLUMBIA, SC.
3. The name of the corporation immediately prior to the filing of this Certificate of Domestication was AEROBIC LIFE MASTER PRODUCTS, INC.
4. The name of the corporation, as set forth in its articles of incorporation, to be filed pursuant to ss. 607.0202 and 607.0401 with this certificate is AEROBIC LIFE MASTER PRODUCTS, INC.
5. The jurisdiction that constituted the seat, siege, social principal place of business or central administration of the corporation, or any other equivalent thereto under applicable law immediately prior to the filing of the Certificate of Domestication was

COLUMBIA, SC  
I am PRESIDENT, of AEROBIC LIFE MASTER PRODUCTS, INC.

and am authorized to sign this certificate of Domestication on behalf of the corporation and have done so this the 1 day of APRIL, 1997

William C. McCune  
(Authorized Signature)

#### Filing Fee:

Certificate of Domestication	\$50.00
Articles of Incorporation and Certified Copy	\$122.50
Total to domesticate and file	\$172.50

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## 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:

AEROBIC LIFE MASTER PRODUCTS, INC.

### ARTICLE II PRINCIPAL OFFICE

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

8335 FREEDOM CROSSING TRAIL  
SUITE 202  
JACKSONVILLE, FL 32256

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TALLAHASSEE, FLORIDA

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### ARTICLE III SHARES

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

100,000

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

WILLIAM E. MCCORMICK  
18 CASSIA CT  
COL, SC 29209

**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):

WILLIAM C. McCUNE  
8335 FREEDOM CROSSING TR  
SUITE 202  
JACKSONVILLE FL 32256

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

1 day of APRIL, 19 1997

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

*William C. McCune*

Signature

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.

1. The name of the corporation is AEROBIC LIFE MASTER PRODUCTS,  
INC.

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

WILLIAM C. McCUNE  
(NAME)  
8335 FREEDOM CROSSING TR  
(P. O. Box or Mail Drop Box **NOT** ACCEPTABLE)  
JACKSONVILLE FL 32256  
(CITY/STATE/ZIP)

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*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.*

William C. McCune  
(SIGNATURE)

4/1/07  
(DATE)