P97000054293

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

300002216863--4 -06/19/97-01023--018 *****131.25 *****131.25

SUBJECT:	QUANTUM MP. (Proposed co	ACT MARKE operate name - must includ	ETING NC e suffix)	
Enclosed is an origi	nal and one(1) copy of the articles	s 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: MARK GRISMAN Name (Printed or typed)				
	1213 NW	125 TERRI Address	ACE	
	5,00,10,00	E1 222	コ ラ	

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

954 - 764 - 0215 Daytime Telephone number SECRETARY OF STATE DIVISION OF CORPORATIONS

19-97 2005

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Flor	пda
Business Corporation Act, hereby adopts the following Articles of Incorporation.	

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ARTICLE I NAME	19	- 6
The name of the corporation shall be:	<u> </u>	
QUANTUM IMPACT MAK	CKETING INC	ORATION
ARTICLE II PRINCIPAL OFFICE		(
The principal place of business and mailing address of this co	orporation shall be:	
1213 NW 125TH TERRACE		
SUNRISE FL 33323		
ARTICLE III SHARES		
The number of shares of stock that this corporation is author	ized to have outstanding at any one time is:	
100 (ONE HUNDRED)		
ARTICLE IV INITIAL REGISTERED AGENT	AND STREET ADDRESS	
The name and Florida street address of the initial registered a	agent are:	
MARK GRISNAM		
1213 NW 125TH TERRACE,	SUNRISE FL 33323	
ARTICLE V INCORPORATOR		
The name and address of the incorporator to these Articles	of Incorporation are:	
MARK GRISMAN		
1213 NW 125 TH TERRACE	E, SUNRISE FL 333	,23
M. Pro	6.16.97	
Signature/Incorporator	Date	

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

Having been named as registered agent and to accept service of p	process for the above stated corporation at the place designated in this
	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	6 - 16 - 97 ·

Signature/Registered Agent

Date