# P97000074439

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

BJECT:	Magic Bullet Inc (Proposed corporate name - must include suffix)			
	-	5	00002277 -08/26/970 *****131.25	625- 10620 ****13
osed is an origina	al and one(1) copy of the article	s of incorporation and a	check for :	l
\$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:	James J. Matthews Name (Printe	d or typed)		
	11439 Laurel Green Wa			
	Addr	<del></del>		
	Jacksonville, Florida 32225		SEC	97
	City, State & Zip		.AET.	AUG F
	904/641-8361		ARY O	FILED AUG 26 PH
	Daytime Telephone number		F STATE FLORID	.U PH 1: 2

9/27/97

#### **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:

Magic Bullet Inc.

97 AUG 26 PM 1: 2 SECRETARY OF STATE TALLAHASSEE, FLORID

ARTICLE II PRINCIPAL OFFICE

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

11439 Laurel Green Way Morth Jacksonville, Florida 32225

#### 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:

James J. Matthews 11439 Laurel Green May North Jacksonville, Florida 32225

### 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):

James J. Matthews 11439 Laurel Green Way North Jacksonville, Florida 32225

Karen K. Matthews 11439 Laurel Green Way North Jacksonville, Florida 32225

The unde	ersigned i	ncorporator(s) h	has(have) executed these Articles of Inc	orporation thi
25th	day of	August	, 19 <sup>97</sup>	
(An addit	ional arti	cle must be adde	ed if an effective date is requested.)	
		(gres)	Market Signature	
	_	Karen	K Matikews	
	_	V	Signature	
	_			
	_	<u></u>	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 Magic Bullet Inc.	
2.	The name and address of the registered agent and office is:	97 SECI TALL
	James J. Hatthews	AUG 2
	(NAME)	26 28 SSET
	11439 Laurel Green May Morth	PN 1: 23 OF STATE E, FLORIDA
	(P. O. Box or Mail Drop Box NOT ACCEPTABLE)	en e
	Jacksonville, Florida 32225	23 DA
	(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.

August 25, 1997 (DATE)