TRANSMITTAL LETTER

7 826 39

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

000002644740---09/21/98--01098--001 *****70.00 *****70.00

SUBJECT: The Impact Dynamix Group, Inc. (Proposed corporate name - must include suffix)

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

□ \$131.25

Filing Fee

Filing Fee,

& Certified Copy

Certified Copy

& Certificate

ADDITIONAL COPY REQUIRED

Marc A. Bellas FROM: Name (Printed or typed) 23110 State Road 54, #115 Address Lutz, Florida 33549 City, State & Zip (813) 991-7787 Daytime Telephone number

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

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

The Impact Dynamix Group, Inc.

PRINCIPAL OFFICE ARTICLE II

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

State of Florida

23110 State Road 54, #115 Lutz, FL 33549

SHARES ARTICLE III

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

5,000*****

INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Marc A. Bellas

25306 Tradewinds Drive, Land O' Lakes, FL 34639

INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

Marc A. Bellas

25306 Tradewinds Drive, Land O')Lakes, FL 34639

Signature/Incorporator

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

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 registated agent

Signature/Registered Agent