

P98000096325

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32302
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Extreme Fitness
management, Inc

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Signature

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ARTICLES OF INCORPORATION
OF
EXTREME FITNESS MANAGEMENT INC.

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 is **EXTREME FITNESS MANAGEMENT INC.**

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ARTICLE II: PRINCIPAL OFFICE

The principal place of business and mailing address of the corporation is 3333 West Kennedy Blvd, Suite 103, Tampa, FL 33609.

ARTICLE III: CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is one thousand (1,000) shares having a par value of (\$1.00) per share.

ARTICLE IV: INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is G. Michael Nelson, 3333 West Kennedy Blvd, Suite 103, Tampa, FL 33609.

ARTICLE V: INCORPORATOR

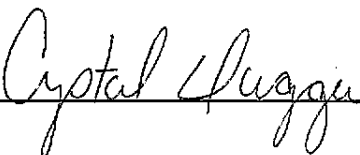
The name and address of the incorporator of these Articles of Incorporation is Capital Connection, Inc., 417 E. Virginia St., Suite 1, Tallahassee, FL 32301.

ARTICLE VI: INITIAL BOARD OF DIRECTORS

The name and address of the initial Board of Directors of the corporation is Jeff White, 3333 West Kennedy Blvd, Suite 103, Tampa, FL 33609.

The undersigned has executed these Articles of Incorporation this 16th day of November 1998.

"Capital Connection, Inc. by Crystal Dugger, Office Manager"

_____

**CERTIFICATE OF DESIGNATION
REGISTERED AGENT / REGISTERED OFFICE**

Pursuant to the provisions of section 607.0501, Florida Statutes, the mentioned 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: EXTREME FITNESS MANAGEMENT INC.

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

G. MICHAEL NELSON ESQ.

3333 West Kennedy Blvd. Suite 103

Tampa, FL 33609

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.


Signature

G. MICHAEL NELSON

Printed Name

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