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

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-12/10/98--01059--005
*****78.75 *****78.75

SUBJECT: Adventure Gear, com, Inc.
(Proposed corporate name - must include suffix)

DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

98 DEC 10 AM 10:42

FILED

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 of Status

☐ \$78.75 Filing Fee & Certified Copy
☐ \$87.50 Filing Fee, Certified Copy & Certificate of Status

ADDITIONAL COPY REQUIRED

FROM: Ian Neil Irwin
Name (Printed or typed)

104 Beach Plaza #213
Address

Tampa, FL 33606
City, State & Zip

813 253 0114
Daytime Telephone number

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

50
12/11

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:

Adventure Gear, Com, Inc.

ARTICLE II PRINCIPAL OFFICE

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

place of business: 104 Beach Place #213 Tampa, Fl

mailing Address: ~~4500~~ P.O. Box 1123 Tampa, Fl 33606-1123

ARTICLE III SHARES

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

10,000,000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

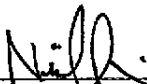
The name and Florida street address of the initial registered agent are:

IAN Neil Irwin
104 Beach Place #213
Tampa, Fl 33606

ARTICLE V INCORPORATOR

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

IAN Neil Irwin
104 Beach Place #213
Tampa, Fl 33606



Signature/Incorporator

12/4/98

Date

(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 registered agent



Signature/Registered Agent

12/4/98

Date

FILED
98 DEC 10 AM 10:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA