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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 922-4001

From:

Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305) 541-3694
Fax Number : (305) 541-3770

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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FLORIDA PROFIT CORPORATION OR P.A.

extreme properties, inc.

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

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(4)

ARTICLES OF INCORPORATION
OF

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

ARTICLE ONE

NAME

The name of the corporation shall be:
Extreme Properties, Inc.
4631 NW 31st Avenue Ste 133
Tamarac, FL 33309

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ARTICLE TWO

PRINCIPLE OFFICE

The principle place of business and mailing address of this Corporation shall be:
4631 NW 31st Avenue Ste 133
Tamarac, FL 33309

ARTICLE THREE

CAPITAL STOCK

The number of shares of stock that this Corporation is authorized to have outstanding at one time is one thousand shares of common stock with a par value of one dollar.

prepared by:

STEVEN S. SIEGELAUB, C.P.A.
10139 N.W. 31st STREET
SUITE 101
CORAL SPRINGS, FL 33065

(954) 753-2222

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ARTICLE FOUR

INITIAL REGISTERED AGENT & ADDRESS

The name and address of the initial registered agent is:

Anthony Hadden
4631 NW 31st Avenue Ste 133
Tamarac, FL 33309

ARTICLE FIVE

INCORPORATOR

The name and address of the Incorporator is:

Anthony Hadden
4631 NW 31st Avenue Ste 133
Tamarac, FL 33309

The undersigned has executed these Articles of Incorporation
this 8th day of January 1999.

Signature: Anthony Hadden

Date: 1 12. 99

CERTIFICATE OF DESIGNATED REGISTERED AGENT

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Pursuant to the provisions of section 607.0501 Florida Statutes, the Undersigned Corporation, under the Laws of the State of Florida submits to the following statement designating the registered agent in the State of Florida.

1. The name of the corporation is:
Extreme Properties, Inc.
2. The name and address of the registered agent is
Anthony Hadden
4631 NW 31st Avenue
Tamarac, FL 33309

Signature: GA HaddenDate: 1-12-99

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FLORIDA

Having been named as the Registered Agent and to accept service of process for the above stated corporation at the place designated in this Certificate, I accept the appointment as Registered Agent and agree to comply with the provisions of all the 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: GA HaddenDate: 1-12-99

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