P99000060307

DATE

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

nnnn2320510--¹ -07/01/99--01030--011 ****122.50 ******78.75

Re: SPORTSMANS ADVANTAGE, Inc. (Name of Corporation)

Gentlemen:

Enclosed please find the original and one copy of the Articles of Incorporation, together with my check in the amount of \$122.50.

This represents the cost of the Filing Fees, Certified Copy of Articles of Incorporation and Fee for Registered Agent Designation for the above named corporation.

Very truly yours.

SECRETARY OF STATE SECRETARY OF SECRETARY OF STATE FLORIDA

SPORTSMAN'S ADVANTAGE, THE (Name of Corporation)

MAILIN	IG ADDRESS OF	CORPORATION —	٦
5000	LEIGHTOI	N FARMS AL	<u>/</u>
		<u> </u>	7
PALMO	ITY, FL	34990	
			\rceil
	PHONI	E ———	\dashv
(561)2	19-0656	- ←	Ì
	Number	Ext.	

B. BROCK JUL 6 1999

ARTICLES OF INCORPORATION

of

SPORTSMAN'S ADVANTAGE, INC

(name of corporation)

The undersigned acting as the incorporators of a corporation under the Florida Business Corporation Act, adopt(s) the following articles of incorporation for such corporation:

the following articles of incorporation for such corporation:						
ARTICLE I - CORPORATE NAME						
The name of the corporation is: 5 PORTS MAN'S ADVANTACE, INC.						
ARTICLE II - DURATION This corporation shall exist perpetually unless dissolved according to Florida law.						
ARTICLE III - PURPOSE						
The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida.						
ARTICLE IV - CAPITAL STOCK The corporation is authorized to issue 500 shares of common stock, par value \$ 1.00 per share.						
ARTICLE V - INITIAL PRINCIPAL OFFICE The street address of the initial principal office and, if different, the mailing address is:						
STREET ADDRESS						
5000 LEIGHTOW FARMS AUR.						
CITY PALM CITY FLORIDA FL ZIP 3499D						
Mailing address, if different						
STREET ADDRESS						
CITY FLORIDA ZIP						

ARTICLE VI - INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office and the name of the initial registered agent at the office is:

NAME WILLIAM H. JACOBS						
ADDRESS 5000 LEIGHTOW	PARMS	AUR.				
CITY PACM CITY		FLORIDA	FL	ZIP 34990		

ARTICLE VII - INITIAL BOARD OF DIRECTORS

This corporation shall have(either increased or diminished from time to time by the By-L	2) directors initially. The	e number of directors may be
addresses of the initial director(s) of the corporation are as fo		one (1). The hames and
NAME WILLIAM H. JACOBS		
ADDRESS 5000 LEIGHTOW FARM	ns AUB.	
CITY PALM CITY	STATE FZ	ZIP 34990
NAME JEFFREY L. MILLER		-
ADDRESS 8170 COOPER SPUR		
CITY MT. HOOD	STATE OR	ZIP 97041
NAME		
ADDRESS		-
CITY	STATE	ZIP
ARTICLE VIII	- INCORPORATORS	
The names and addresses of the incorporators signing these A		ollows:
NAME WILLIAM H. JACOBS		
ADDRESS 5000 LEIGHTON FA	10 us AUB	- Addison
CITY PALM CITY	STATE FL	ZIP 34990
NAME JERREY L. MILLER		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
ADDRESS 8170 COOPER SPUR		
CITY MT. HOOD	STATE OR	ZIP 9704/
NAME		
ADDRESS		-
CITY	STATE	ZIP
		4 57
The undersigned incorporator(s) have executed these Arday of	_	<i></i>
day 01	<u>, 19 ~ /</u>	
	William H.	(Signature)
7	Jeffo Mille	(Signature)
		(Signature)

CERTIFICATE OF DESIGNATION REGISTERED AGENT/ REGISTERED OFFICE

SECRETARY OF STATE

SPORTSMAN'S ADVANTAGE, INC.

(name of corporation)

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted:

The above corporation, organized under the laws of the State of Florida with its registered office as indicated in the Articles of Incorporation

at 5000 LEVELTON PARMS AUE

PACE CITY, PL 34490, STATE OF FEBRUAR; MANTIN COMMY

has named William H. JAKOBS

located at the aforesaid address, as its registered agent to accept service of process within this state.

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.

Vellani H. Joseph (Signature)