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Department of State

Division of Corporations

P. O. Box 6327

Tallahassee, FL 32314

700003041577---5 -11/10/99--01090--010 *****78.75 ******78.75

SUBJECT: Florida Wrestling Federation, Inc.
(Proposed corporate name - must include suffix)

Enclosed is an original and one(1) copy of the article	s of incorporation and a	check for:		
\$70.00 \$78.75 Filing Fee Filing Fee & Certificate of Status	□\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	□ \$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	99	
FROM: John W. Fr. Name (P) 405 Ave. L N		AHASSEE, FLORIDA	59 NOV 10 AN 10: 19	
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863-293-4856 Daytime 7	- 941-706-3 Telephone number	NO CUPT	in .o.ena <u>sw</u> en	

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

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

FILED

ARTICLE I

The name of the corporation shall be:

Florida Wrestling Federation, Inc.

99 NOV 10 AM 10: 19

ARTICLE II PRINCIPAL OFFICE

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

405 Ave. L N.E. Winter Haven, FC. 33881

ARTICLE III **SHARES**

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

500 Shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

John W. Friend 405 Ave. L N.E.

WinterHaven, FL-33881

<u>ARTICLE V INCORPORATOR</u>

The <u>name and address</u> of the incorporator to these Articles of Incorporation are:

John W. Friend

405 Ave- L N.E.

Winter Haven, FL 33881

(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