

JAN. -08' 01 (MON) 16:02

CSC TALL

P. 001

JJW

PO1000002979

Florida Department of State
Division of Corporations
Public Access System
Katherine Harris, Secretary of State

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H01000002414 0)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

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

EFFECTIVE DATE

01-01-01

From: Account Name : CORPORATION SERVICE COMPANY
Account Number : T200000000195
Phone : (850)521-1000
Fax Number : (850)521-1030

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
01 JAN -8 PM 12:06

FLORIDA PROFIT CORPORATION OR P.A.

K2 WATERFEATURES, INC.

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

Effective - 1/1/01

N. Culligan JAN 9 - 2001

JAN -08' 01 (MON) 16:02

CSC TALL

P.002



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

January 8, 2001

CORPORATION SERVICE COMPANY

SUBJECT: K2 WATERFEATURES, INC.
REF: W01000000433

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The registered agent must have a Florida street address. A post office box, personal mail box (PMB), or mail drop-box address is not acceptable.

ARTICLE 6 IS NOT LEGIBLE.

If you have any further questions concerning your document, please call (850) 487-6931.

Becky McKnight
Document Specialist

FAX Aud. #: H01000002414
Letter Number: 301A00000870

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

H010000024140
LOCATION: 407 898 8810**ARTICLE I NAME**

The name of the corporation shall be:

K2. WATERFEATURES, INC.

Effective 11/1/01

EFFECTIVE DATE

01-01-01

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

2123 WESTBOURNE DR.

OVIDO, FL. 32765

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is:

100 @ \$1.00/SHARE

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

TO BE NAMED AT TIME OF ANNUAL REPORT.

ARTICLE VI REGISTERED AGENT

The name and Florida street address registered agent is:

A. JAMES CRANER, ESQUIRE

P.O. Box 536207 or 1501 E. CONCORD STREET,
Orlando, FL 32853-6207**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

JOHN D. KELLY
2123 WESTBOURNE DR.
OVIDO, FL. 32765

Having been named as registered agent to accept service of process for the above stated corporation as the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Signature/Registered Agent

Date

Signature/Incorporator

Date

H010000024140

P.01/03 407 898 8810

JAMES CRANER

JAN-05-2001 11:56

FILED STATE
SECRETARY OF CORPORATIONS
DIVISION OF CORPORATIONS
01 JAN -8 PM 12:06