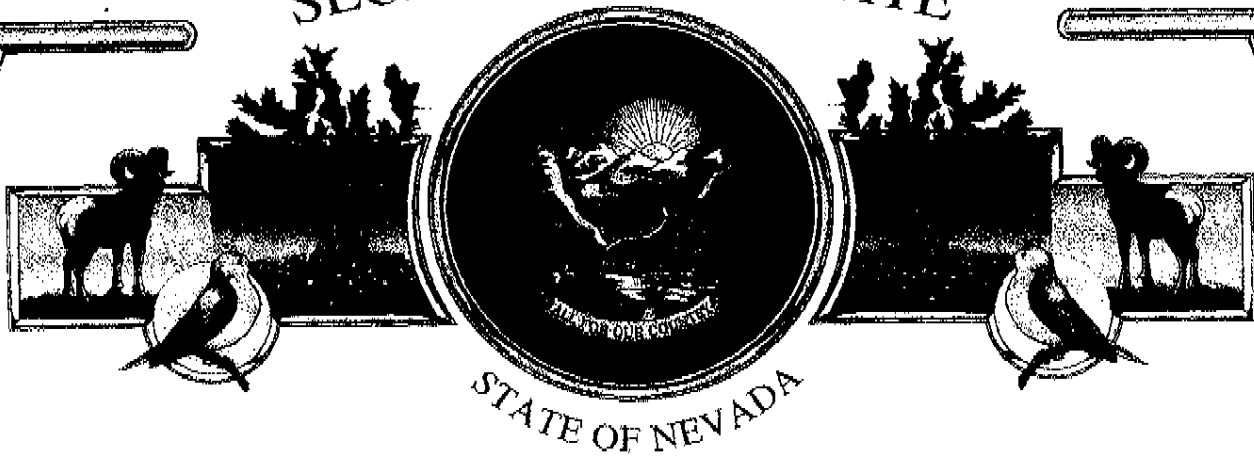
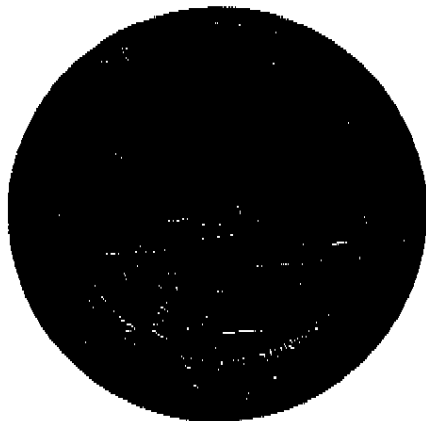


SECRETARY OF STATE



CORPORATE CHARTER

I, DEAN HELLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that **INCLINE ATHLETIC ORGANIZATION** did on **January 26, 2004** file in this office the original Articles of Incorporation; that said Articles are now on file and of record in the office of the Secretary of State of the State of Nevada, and further, that said Articles contain all the provisions required by the law of said State of Nevada.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office, in Carson City, Nevada, on **January 27, 2004**.

Dean Heller

DEAN HELLER
Secretary of State

By

Kathleen P.

Certification Clerk



DEAN HELLER
Secretary of State
208 North Carson Street
Carson City, Nevada 89701-4290
(775) 884 5708
Website: secretaryofstate.biz

FILED # 01611-2004

JAN 26 2004

IN THE OFFICE OF
Dean Heller
DEAN HELLER, SECRETARY OF STATE

Nonprofit Articles of Incorporation
(PURSUANT TO NRS 82)

Important: Read attached instructions before completing form.

ABOVE SPACE IS FOR OFFICE USE ONLY

1. Name of Corporation:	Incline Athletic Organization
2. Resident Agent Name and Street Address: <small>(must be a Nevada address where process may be served)</small>	Robert Damon Spitzer Name 264 Village Blvd., Bldg. 2 Incline Village NEVADA 89451 Physical Street Address City State Zip Code Additional Mailing Address City State Zip Code
3. Names, Addresses, Number of Board of Directors/Trustees:	The First Board of Directors/Trustees shall consist of <u>three</u> members whose names and addresses are as follows: 1. Chris Laramore Name P.O. Box 9191 Incline Village NV 89452 Street Address City State Zip Code 2. Wayne McClelland Name 569 Len Way Incline Village NV 89451 Street Address City State Zip Code 3. Cindy McClelland Name 569 Len Way Incline Village NV 89451 Street Address City State Zip Code 4. _____ Name Street Address City State Zip Code
4. Purpose:	The purpose of this Corporation shall be: to provide parent-supervised, low-cost, year-round sports for children in the community.
5. Names, Addresses and Signatures of Incorporators: <small>(attach additional pages if there is more than 1 incorporator)</small>	Robert Damon Spitzer Name 264 Village Blvd., Bldg. 2 Incline Village NV 89451 Street Address City State Zip Code Signature <i>Robert Damon Spitzer</i>
6. Certificate of Acceptance of Appointment of Resident Agent:	I hereby accept appointment as Resident Agent for the above named corporation. <i>Robert Damon Spitzer</i> Authorized Signature of R.A. or On Behalf of R.A. Company Date <u>1/23/2004</u>

This form must be accompanied by appropriate fees. See attached fee schedule.