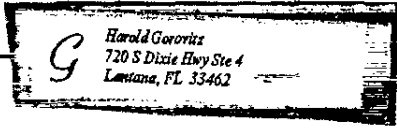


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(Requestor's Name)



(Address)

(City/State/Zip/Phone #)

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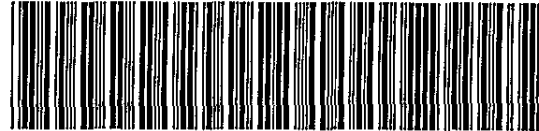
(Business Entity Name)

(Document Number)

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**ARTICLES OF INCORPORATION**

of

**A.R. Alan Productions, Inc.**

The undersigned subscriber (s) to these Articles of Incorporation, natural person (s) fully capable to contract, hereby form a corporation under the laws of the State of Florida.

***ARTICLE I - CORPORATE NAME***

The name of the corporation is: **A.R. Alan Productions, Inc.**

***Article II-DURATION***

This corporation shall exist perpetually unless dissolved in accordance with Florida Law.

***Article III- PURPOSE***

The corporation is organized for the purpose of engaging in any activities or business which is permitted or allowed under the laws of the United States and the State of Florida.

***ARTICLE IV- CAPITAL STOCK***

The corporation is authorized to issue One Hundred shares ( 100 ) of Par Value-in Dollars One dollar dollar (s) ( \$1.00 Par Value-Numeric par value Common Stock, which shall be designated " Common Shares."

**ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT**

The street address of the Initial Registered Agent's office and the name of the Initial Registered Agent at that office is:

**NAME Barbara Bixon**

**ADDRESS 9674 Harbour Lake Circle**

**City Boynton Beach FLORIDA ZIP 33437**

**The principal office, if known, or the mailing address of the corporation is:**

**NAME: A.R. Alan Productions, Inc.**

**ADDRESS: 9674 Harbour Lake Circle**

**CITY Boynton Beach FLORIDA ZIP 33437**

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE VI - INITIAL BOARD OF DIRECTORS**

This corporation shall have One ( 1 ) directors initially. The number of directors may be either increased or decreased from time to time by the By-Laws, but shall never be less than one (1). The names and address of the initial director (s) of the corporation are listed as follows:

**NAME Barbara Bixon**

**ADDRESS 9674 Harbour Lake Circle**

**CITY Boynton Beach STATE OF FLORIDA ZIP 33437**

**NAME**

**ADDRESS**

**CITY STATE OF FLORIDA ZIP**

**NAME .**

**ADDRESS**

**CITY STATE OF FLORIDA ZIP**

**NAME**

**ADDRESS**

**CITY STATE OF FLORIDA ZIP**

**ARTICLE VII - INCORPORATORS**

The names and addresses of the incorporators signing these Articles of Incorporation are as follows:

**NAME Barbara Bixon**

**ADDRESS 9674 Harbour Lake Circle**

**CITY Boynton Beach STATE OF FLORIDA ZIP 33437**

**NAME**

**ADDRESS**

**CITY STATE OF FLORIDA ZIP**

**NAME**

**ADDRESS**

**CITY STATE OF FLORIDA ZIP**

**IN WITNESS WHEREOF, the undersigned subscriber (s) have executed these articles of Incorporation this 12th day of February, 2004**

*X Barbara Bixon* (Seal)

\_\_\_\_\_ (Seal)

\_\_\_\_\_ (Seal)

\_\_\_\_\_ (Seal)

STATE OF FLORIDA )  
 )  
COUNTY OF PALM BEACH )

Before me, a Notary Public authorized to take acknowledgments in the State and County as set forth above, personally appeared:

|                                   |                                 |
|-----------------------------------|---------------------------------|
| <u>Barbara Biero</u><br>Signature | _____<br>Form of Identification |
| _____<br>Signature                | _____<br>Form of Identification |
| _____<br>Signature                | _____<br>Form of Identification |

known to me and known to be the person (s) who executed the foregoing Articles of Incorporation, who is known to me acknowledged before me that they executed these Articles of Incorporation, that I relied upon the form \_\_\_ of identification of the above named person \_\_\_ as indicated opposite each name, and that no oath was { not } taken.



NOTARY RUBBER STAMP SEAL

Witness my hand and official seal in the County of Palm Beach and State last aforesaid This 13th Day of February, 2004

Harold Gorovitz  
Notary Signature

Harold Gorovitz

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SECRETARY OF STATE  
TALLAHASSEE FL 32399

**CERTIFICATE AND ACKNOWLEDGMENT  
OF REGISTERED AGENT**

**CERTIFICATE OF REGISTERED AGENT**

**OF**

**.A.R. Alan Productions, Inc.**

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

The above corporation, desiring to organize under the Laws of the State of Florida with its registered office as indicated in the Articles of Incorporation

at 9674 Harbour Lake Circle  
Boynton Beach, Florida 33437

has named Barbara Bixon located at the aforesaid address, as its Registered Agent to accept service of process within the State of Florida.

**ACKNOWLEDGMENT**

Having been named as Registered Agent to accept service of process for the above stated corporation at the place designated in this certificate, and being familiar with the obligations of that position, I hereby accept to act in this capacity, and agree to comply with the provisions of Florida Law in keeping open said office.

*x Barbara Bixon*

(Registered Agent)

**Barbara Bixon**