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Florida Department of State
Division of Corporations
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To:
Division of Corporations
Fax Number : (850) 617-6381

From:
Account Name : CSH SERVICES, LLC
Account Number : I20070000160
Phone : (800) 494-3124
Fax Number : (561) 455-9885

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DEPARTMENT OF STATE
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FLORIDA PROFIT/NON PROFIT CORPORATION

ODESKI FILM CO.

Certificate of Status	0
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ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

ODESKI FILM CO.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

2000 PONCE DE LEON BLVD, STE 500

CORAL GABLES, FLORIDA 33134

ARTICLE III PURPOSE

The purpose for which the corporation is organized is to engage in any activity or business permitted under the laws of the State of Florida.

ARTICLE IV SHARES

The number of shares of stock is:

100 COMMON SHARES PAR VALUE \$0.01

ARTICLE V INITIAL OFFICERS / DIRECTORS (optional)

The name(s), address(es), and title(s) of the directors and officers is/are:

DIRECTOR

BENJAMIN ODELL

2000 PONCE DE LEON BLVD, STE 500

CORAL GABLES, FLORIDA 33134

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PAGE 2 ODESKI FILM CO.

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

BENJAMIN ODELL
2000 PONCE DE LEON BLVD, STE 500
CORAL GABLES, FLORIDA 33134

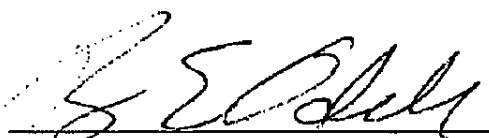
ARTICLE VII INCORPORATOR

The name and Florida street address of the incorporator is:

BENJAMIN ODELL
2000 PONCE DE LEON BLVD, STE 500
CORAL GABLES, FLORIDA 33134

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


BENJAMIN ODELL / Registered Agent

12/15/2008
Date


BENJAMIN ODELL / Incorporator

12/15/03
Date

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