P12000002083

_____
(Requestor's Name)

_____
(Address)

_____
(Address)

_____
(City/State/Zip/Phone #)

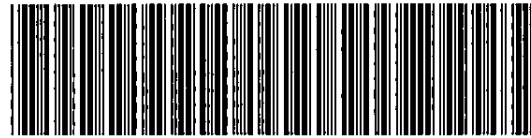☐ PICK-UP   ☐ WAIT   ☐ MAIL

_____
(Business Entity Name)

_____
(Document Number)

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FILED
2012 JAN -6 PM 1:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. Shivers JAN 0 9 2012

11-67595

Regarding: smash vision corp

I would like to request that this corporation go into effect on January 2, 2012.
Thank you,

Marco Portuondo
239-245-0494
413 NE 15th Ave
Cape Coral FL 33909

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:

SmashVision Corp

ARTICLE II   _PRINCIPAL OFFICE_

Principal **street** address   Mailing address, if different is:

413 NE 15th Ave
Cape Coral FL 33909

ARTICLE III   _PURPOSE_
The purpose for which the corporation is organized is:

Video Production and Promotion

ARTICLE IV   _SHARES_
The number of shares of stock is: 1000

ARTICLE V   _INITIAL OFFICERS AND/OR DIRECTORS_

Name and Title: Marco Portuondo (President)   Name and Title:
Address: 413 NE 15th Ave   Address:
             Cape Coral FL 33909

Name and Title: Mark Asciutto (Treasurer/Secretary)   Name and Title:
Address: 23494 Westchester Blvd   Address:
             Port Charlotte FL 33980

Name and Title: Name and Title:
Address: Address:

ARTICLE VI   _REGISTERED AGENT_
The **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:
Name: Marco Portuondo
Address: 413 NE 15th Ave
          Cape Coral FL 33909

ARTICLE VII   _INCORPORATOR_
The **name and address** of the Incorporator is:
Name: Marco Portuondo
Address: 413 NE 15th Ave
          Cape Coral FL 33909

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

_____   12/20/11
Required Signature/Registered Agent   Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

_____   12/20/11
Required Signature/Incorporator   Date