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TRANSMITTAL LETTER

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

200002758212--9
-01/29/99--01026--005
*****87.50 *****87.50

SUBJECT: Suductive Productions Inc.
(Proposed corporate name - must include suffix)

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

☐ $70.00 Filing Fee	☐ $78.75 Filing Fee & Certificate of Status	☐ $78.75 Filing Fee & Certified Copy	☑ $87.50 Filing Fee, Certified Copy & Certificate of Status

ADDITIONAL COPY REQUIRED

FROM: Shawn P. Slattery
Name (Printed or typed)

3619 NE 207 St # 2303
Address

Aventura FL. 33180
City, State & Zip

305 466-9576
Daytime Telephone number

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
99 JAN 29 PM 6:25

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

The undersigned incorporater, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
99 JAN 29 PM 6:25

ARTICLE I NAME

The name of the corporation shall be:

Suductive Productions Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

3619 NE 207 St # 2303 Aventura FL 33180

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

One

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Shawn P. Slattery

3619 NE 207 St # 2303 Aventura FL 33180

ARTICLE V INCORPORATOR

The **name and address** of the incorporator to these Articles of Incorporation are:

Shawn P. Slattery

3619 NE 207 St # 2303 Aventura FL 33180

Signature/Incorporator — Date: 1/27/99

(An additional article must be added if an effective date is requested.)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent

Signature/Registered Agent — Date: 1/27/99