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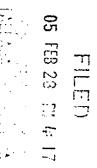
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TRANSMITTAL LETTER

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

SURFECT. Crooked Tv	vilight Theatre Company Inc.				
	(PROPOSED CORPORATE	NAME - MUST INCLU	DE 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			
		ADDITIONAL CO	PY REQUIRED		
	•				
FROM;	FROM: Rob O'Brien Name (Printed or typed)				
	3956- Town Center Blvd. Suite 343 Address				
	Orlando, FL 32837 City, State & Zip				
407-348-8897					

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

ARTICLES OF INCORPORATION OF CROOKED TWILIGHT THEATRE COMPANY, INC.

In Compliance with Chapter 617 F.S., (Not for Profit)

ARTICLE I. NAME.

The name of the corporation shall be:

Crooked Twilight Theatre Company, Inc.

ARTICLE II. PRINCIPAL OFFICE

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

3956 Town Center Blvd. Ste. 343 Orlando, FL 32837

ARTICLE III. PURPOSE

The purpose for which the corporation is organized is:

- A. This corporation is a not-for-profit corporation organized under Chapter 617, Florida Statutes. It is not organized for the private gain of any person. The specific purposes of this corporation are to engage in the production, publication and presentation of theatrical and musical works including, but not limited to, plays, musicals, operas, operettas, concerts, dinner shows, trade shows, readings, workshops, seminars, films, videos, and recordings along with any type of public education regarding these works.
- B. To exercise all rights and powers conferred by the laws of the State of Florida upon nonprofit corporations.
- C. Provided, however, that the corporation shall not engage in any action which is not permitted to be carried on by nonprofit corporations under the Internal Revenue Code and no part of the net earnings of the Corporation shall inure to the benefit of or be distributable to its members, directors, or officers; but the Corporation shall be authorized and empowered to pay reasonable compensation to these people for services rendered, and to make payments and distributions in furtherance of its stated purposes.

ARTICLE IV. MANNER OF ELECTION

The Bylaws shall provide the method of election of all Directors, and the number of Directors may be raised or lowered by amendment of the Bylaws but shall in no case be less than three.

The officers of the Corporation shall consist of a President, Secretary, and Treasurer. Other officers may be provided for in the Bylaws. Each Officer shall be elected by the Board of Directors (and may be removed by the Board of Directors) at such time and in such manner as may be prescribed by the Bylaws.

ARTICLE V. INITIAL DIRECTORS AND OFFICERS

The initial Board of Directors shall have three members whose names and addresses are:

Name Rob O'Brien Daryl Taylor-Hazel Barbi Slater Address

238 Hidden Springs Circle, Kissimmee, Florida 34743 569 E. Minnehaha Avenue, Clermont, Florida 34711 7867 Sugar Bend Drive, Orlando, Florida 32819 The name and address of each initial Officer of the Corporation is as follows:

Title

Name

Address

President

Rob O'Brien

238 Hidden Springs Circle, Kissimmee, Florida 34743

Treasurer

Daryl Taylor-Hazel

569 E. Minnehaha Avenue, Clermont, Florida 34711

Secretary

Barbi Slater

7867 Sugar Bend Drive, Orlando, Florida 32819

ARTICLE VI. INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the Registered Agent is:

Rob O'Brien

238 Hidden Springs Circle, Kissimmee, Florida 34743

ARTICLE VII. INCORPORATOR

The name and address of the Incorporator is:

Rob O'Brien

238 Hidden Springs Circle, Kissimmee, Florida 34743

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.

Signature/Registered Agent

Date

Print Name/Registered Agent

Signature/Incorporator

Date

Print Name/Incorporator