LUKS 103 N. MERIDIAN STREET, LOWER LEVEL **FALLAHASSEE, FL 32301** 222-1173 W08631 FILING COVER SHEET ACCT, #FCA-14 CONTACT: **CINDY HICKS** -01/26/00--01046--017 DATE: **REF. #:** CORP. NAME: RTICLES OF INCORPORATION () ARTICLES OF AMENDMENT () ARTICLES OF DISSOLUTION) ANNUAL REPORT () TRADEMARK/SERVICE MARK () FICTITIOUS NAM) FOREIGN QUALIFICATION () LIMITED PARTNERSHIP () LIMITED LIABILITY () REINSTATEMENT () MERGER () WITHDRAWA () CERTIFICATE OF CANCELLATION () UCC-1 () UCC-3 . . () OTHER: STATE FEES PREPAID WITH CHECK# 35/9 AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED: COST LIMIT: \$ PLEASE RETURN: CERTIFIED COPY () CERTIFICATE OF GOOD STANDING () PLAIN STAMPED COPY) CERTIFICATE OF STATUS

Examiner's Initials

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

Audio Visual Consultants, Inc.

ARTICLE II PRINCIPAL OFFICE

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

8657 NW 56th Street Miami FL 33166

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

10,000 Shares .01 par value

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RECRETARY OF

ALLAHASSEE, F

RTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

CorpDirect Agents

103 N. Meridian Street Lower Level

Tallahasee FL 32301

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

Emanual D. Torti 146 Main Street Norfolk, MA 02056

Signature/Incorporator

Date 2000

(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

Its Agent: Cynthia A. Hicks