POSSIBILITIES PO

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

SUBJECT: CherryTree Studios Inc. (Proposed corporate name - must include suffix)			00000311! -01/31/00- - *****78.75	3 870 1 -01134019 5 *****78.75
Enclosed is an origin	nal and one(1) copy of the artic	cles of incorporation an	d a check for:	
☐ \$70.00 Filing Fee	X\$78.75 Filing Fee & Certificate of Status	☐\$78.75 Filing Fee & Certified Copy	□\$87.50 Filing Fee, Certified Copy	4

Status

ADDITIONAL COPY REQUIRED

& Certificate of

FROM:	Rita Brennan	
(Name (Printed or typed)	
	1615, Mayo Street	TAT SE
<u>-</u>	Address	JAN F
	Hollywood, Fl. 33020	HAST HAST
******	City, State & Zip	
	(954) 921-8276	FECTOR ST
	Daytime Telephone number	

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

70

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.

<u>ARTICLE I NAME</u>

The name of the corporation shall be:
CherryTree Studios Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: 1615, Mayo Street, Hollywood, Florida, 33020

ARTICLE III SHARES

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

100 (one hundred)

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:
Rita Brennan, 1615, Mayo Street, Hollywood, Florida, 33020

ARTICLE V INCORPORATOR

The <u>name and address</u> of the incorporator to these Articles of Incorporation are: Rita Brennan, 1615, Mayo Street, Hollywood, Florida, 33020

Signature/Incorporator 1/28/50.

(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