## TRANSMITTAL LETTER POOCOOOO 3121

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

| SUBJECT:             | Aerial Production (PROPOSED CORPORA         | ns.Com, Inc.<br>TE NAME - MUST INCL                | UDE SUFFIX)  | – · .                         |
|----------------------|---|--|--|-------------------------------|
| Enclosed is an origi | nal and one(1) copy of the article          | es of incorporation and a                          | check for:   | •                             |
| \$70.00 Filing Fee   | Filing Fee<br>& Certificate of Status       | \$78.75 Filing Fee & Certified Copy  ADDITIONAL CO | \$87.50 Filing Fee, Certified Copy & Certificate of Status |                               |
| FROM:                | Christopher Bu<br>Name (P                   |  | AUG 28 PH 12: 53   |                               |
| 0 49                 | Tallaharsee, F7 City,  850 - 222  Daytime T |  | 00003374<br>-08728/000<br>*****78.75                       | 158C<br>1030011<br>*****78.75 |
|                      |   | · - · · · · · · · · · · · · · · · · · ·            | ·  |                               |

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

## 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: Aerial Puoductions. Com, Inc. ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 3240 Capital Circle SW Tallaharare, Florida 32310 **PURPOSE** ARTICLE III The purpose for which the corporation is organized is: Any legal business activity ARTICLE IV SHARES The number of shares of stock is: 7,500 , #1 par value ARTICLE V INITIAL OFFICERS/DIRECTORS (optional) The name(s) and address(es): JASON MANUEL GARCIA Pres, VP, Sec, Tres. 3240 CApital Circle SW Tullahooner, Florida 32310 REGISTERED AGENT The name and Florida street address registered agent is: Christopher Brooks 315 S. CAlhoun Street Ste 350 Taildhance, Florida 32301 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Christephen Brooks 315 S. Calhoun StoreT Ste 350 TAllahassee, Florida 32301 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

Signature/Incorporator