P0000085274 TRANSMITTAL LETTER

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

800003382688---6 -09/06/00--01020--007 *****78 75 *****78 75

Subject: Brainchild Media, Inc.

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

\$78.75

From: Carol L. Sherrow 664 Sabal Lake Dr Apt 104 Longwood, FL 32779

FILED

00 SEP -5 AM 9: 11

SECRETARY DE STATE
TAIT AHASSEE, FLORIN

Jk 9/11

ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corportion under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

Brainchild Media, Inc.

OO SEP -5 AM 9: I SECRETARY OF STATALLAHASSEE, FLOR

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall b

Place of business: 664 Sabal Lake Dr Apt 104 Mailing address: 345 Lake Kathryn Cr. Longwood, FL 32779 Casselberry, FL 32707

ARTICLE III SHARES

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

500 shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Philip A. Carlin 754 Lake Kathryn Circle Casselberry, FL 32707

ARTICLE V INCORPORATOR(S)

The name(s) and address(es) of the incorporator(s) to these Articles of Incorporation is (are):

Carol L. Sherrow 664 Sabal Lake Dr Apt 104 Longwood, FL 32779

Signature

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 OR 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

- 1. The name of the corporation is: Brainchild Media, Inc.
- 2. The name and address of the registered agent and office is:

Philip A. Carlin 754 Lake Kathryn Circle Casselberry, FL 32707 00 SEP -5 AM 9: 11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Having been named as the 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 am familiar with and accept the obligations of my position as registered agent.

Signature