Pol 1000006725

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

| SUBJECT: | | s and vide | | | ಷಾ ಸ ಉತ್ತರ | |
|---|--|--|--|---|-------------------|--|
| | (PROPOSED CORPORAT | | DE SUFFIX) :000035: -01/16/0 *****78 | 38763- 101131(.75 ***** | 5 106 78.75 | |
| 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 | □ \$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED | of | | |
| FROM: | Name (Pr | E O, PERE | | | - - | |
| 2980 Riverside Dr #227 Address | | | | | | |
| | (954) 7. | rings, Flor State & Zip 57-3344 elephone number | <u>-ida</u> , 33 | OI JAN 16 PM 1: 05 O SECHETARY OF STATE O'ALLAHASSEE, FLORIDA | FILED | |

NOTE: 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 | | | s |
| The name of the corporation shall be: LINK AUDIO and VIDEO INC. | | | |
| LINK AUDIO AIRE OTHER THE | | | |
| ARTICLE II PRINCIPAL OFFICE | | ~ | |
| The principal place of business/mailing address is: 2980 Querside Dr Sut #227 | | | |
| Coral Springs FL. 33065 | | | |
| ARTICLE III PURPOSE | | ÷ - | |
| The purpose for which the corporation is organized is: | | | |
| Audio and video instablions | | | |
| ARTICLE IV SHARES | | PEG E | 01. |
| The number of shares of stock is: | | AFF TA | N |
| ARTICLE V INITIAL OFFICERS DIRECTORS (optional) | | | FILED |
| The name(s) and address(es): | | 15 L | ž Ö |
| ENRIQUE PEREDA | | | • • |
| | | | |
| | | | |
| ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is: | | | ÷. |
| ENPICHE PEPEDA | | | |
| 2980 Riverside Dr suit #227 Coral Springs FL 33065 | | | |
| ARTICLE VII INCORPORATOR | | | |
| The <u>name and address</u> of the Incorporator is: | | | |
| 2980 RIVERSIDE Dr SUIT # 227 | | | |
| Coral Spring FL 33065 | | | |
| ************************************** | | | |
| certificate, I am familiar with and accept the appointment as registered agent and agree to | | ie uesignuica | - |
| 6.200 | 01-11- | <u> </u> | |
| Signature/Registered Agent | Date | | |
| Basilian | 01-11- | -d. | |
| Signature/Incorporator | Date | | ·· |