P01000007495

TRANSMITTAL LETTER

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

800003553388--5 -01/18/01--01035--002 ******78.75 ******78.75

			*****78.75	5 未未未用
SUBJECT:	Smoken (PROPOSED CORPORA)	Mirrorz Rec TENAME-MUSTINCE	cords Inc.	
Enclosed is an original	nal and one(1) copy of the article	s 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	& Certificate of Status	
FROM:	Michael C	ene Straub inted or typed)		
457 Alafaya Woods Blvd. Apt E Address Oviedo FL 32765				
	City, State & Zip		TARY ASSE	

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

Daytime Telephone number

CB 1-22

	-
ARTICLES OF INCORPORATION	
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	
ARTICLE I NAME	Proc 1 1
The name of the corporation shall be:	FILED
Smoken Mirrorz Records Inc	01 JAN 18 AM 8:10
- Moken Mill of 2 Mccolos Inc.	
ARTICLE II PRINCIPAL OFFICE	SECRETARY OF STATE TALLAHASSEE, FLORIDA
The principal place of business/mailing address is:	
457 Alafaya Woods Blud Apt E	
Oviedo, Fc 32765	
ARTICLE III PURPOSE	
The purpose for which the corporation is organized is:	
Promotion Management Recording Marketin Title	ibution C
Promotion, Management, Recording, Marketing, Distr Of husic Artists and their works.	rough Frales
ARTICLE IV SHARES	
The number of shares of stock is:	
10,000	
ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)	
The name(s) and address(es):	
N/A	
ARTICLE VI REGISTERED AGENT	
The name and Florida street address of the registered agent is:	
Sherne Torgerson	
457 Alafaya Woods Blud. Apt E Oviedo, Fr. 32765	
ARTICLE VII INCORPORATOR	
The name and address of the Incorporator is:	
Michael Gene Straub	
457 Alataya Woods Blud. Apt E Oviedo, FL 32765	
Oviedo, Fiz 32765	
**************************************	*******
Having been named as registered agent to accept service of process for the above stated corporatificate, I am familiar with and accept the appointment as registered agent and agree to act it	oration at the place designated in this
	-
Sherrie Jorgesson	1/16/00
Signature/Registered Agent (Date /
CME, DO	//6/00 Date
(mike) Michael Hraub	1/16/00
Signature/Incorporator	Date '