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July 26, 2001

Division of Corporations, New Corporations POB 6327 Tallahassee, FL 32314

800004506178:--7 -07/30/01--01009--007 *****78.75 *****78.75

Dear Sir,

Enclosed is our check for \$78.75 for filing fees for OBrien Studioworks, Inc. for a certified copy of the articles of incorporation and a certificate of incorporation.

Please return the documents to:

Ben H. Moore 720 North Maitland Avenue, Ste 105 Maitland, FL 32751

Thank you for your attention to this matter.

Sincerely,

Ben H. Moore

Please Return Via FEDEX airbill enclosed. Thanks!!!

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FILED

ARTICLES OF INCORPORATION

01 JUL 30 AH 11: 22

OBrien Studioworks, Inc.

SECRETARY OF STATE TALLAHASSEE FLORIDA

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

ARTICLE I NAME

The name of the corporation shall be:

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OBrien Studioworks, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

942 Barbados Avenue Orlando, FL 32825

ARTICLE III SHARES

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

5,000 shares at a \$1.00 Par Value

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Sean Justin OBrien 942 Barbados Avenue Orlando, FL 32825

ARTICLE V INCORPORATOR(S)

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

Sean Justin OBrien 942 Barbados Avenue Orlando, FL 32825

19th day of	July	, 2 2 x 2001
	•	
SEAN BOO		
	Signature	
	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:_	OBrien	Studioworks	Inc.	
2. The name	and address of the reg	gistered agent and offic	ce is:	O1 JUI SECRI	-
-		Name) Barbados Avenue		JUL 30 AMII: CRETARY OF ST LAHASSEE FLO	The same of the sa
-	(P.C). Box not acceptable) ando, FL 32825	-	II: 22 STATE CORIDA	
•		(City/State/Zip)		-	
Having been above stated the appoint to comply will mance of my as registered	n named as registered a d corporation at the pla nent as registered agen ith the provisions of all of duties, and I am familia d agent.	agent and to accept se ce designated in this o nt and agree to act in t statutes relating to the ar with and accept the	ervice of proces certificate, I hen his capacity. I t e proper and co obligations of i	s for the eby accept further agre mplete peri my positior	ee for- 1
- San((Signature)		7 [1 o]		