# COUP1000009

February 8, 2002

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

400004946334--8 -02/18/02--01020--012 \*\*\*\*122.50 \*\*\*\*\*\*78.75

Re: Shared Dreams Productions, Inc.

#### Gentlemen:

Enclosed please find the original and one copy of the Articles of Incorporation, together with our check in the amount of \$122.50.

This represents the cost of the Filing Fees, Certified Copy of Articles of Incorporation and Fee for Registered Agent Designation for the above named corporation.

Very Truly Yours,

Colin M. Charles

Shared Dreams Productions, Inc., Shared Dreams Productions, Inc.

4000 S.W. 47<sup>th</sup> Street, Lot F7 Gainesville, Florida 32608

(352) 379-0545

(Jalailoa

## ARTICLES OF INCORPORATION

•		of	
	Shared Dreams Pr	oductions, Inc.	-
•	(n	ame of corporation)	
The undersig the following artic	ned acting as the incorporators of a cles of incorporation for such corpora	corporation under the Florida Business (tion:	Corporation Act, adopt(s)
The name of	ARTICL the corporation is:	E I - CORFORATE NAME	2002 FEB I
	Shared Dreams P	roductions, Inc.	S &
This corpora	AR ation shall exist perpetually unless dis	TICLE II - DURATION ssolved according to Florida law.	ANIO: 17 OF STATE FLORIDA
•		TICLE III - PURPOSE	
The corpora United States and	ation is organized for the purpose of each the State of Florida.	engaging in any activities or business pe	ermitted under the laws of the
	ation is authorized to issue	CLE IV - CAPITAL STOCK shares of common stock, par value \$  / - INITIAL PRINCIPAL OFFICE  and, if different, the mailing address is:	
STREET ADDE			
0,102,122,	1 11 11 11 11 11 11 11 11 11 11 11 11 1	Lot F7	
	4000 S. W. 47th Street	FLORIDA	ZIP 32608
CITY	Gainesville,	T LONDIN	32000
STREET ADD	ddress, if different		<u> </u>
SIKEEI ADDI	(ESS		
CITY		FLORIDA	ZIP
		IAL REGISTERED OFFICE AND A	
The stree	et address of the initial registered	office and the name of the initial reg	istered agent at the office is
NAME	Cary A. McClain		

ZIP 32614-7050

4300 N. W. 23rd Avenue,

Gary A. McClain

Gainesville,

**ADDRESS** 

CITY

**FLORIDA** 

Suite #34

## ARTICLE VII - INITIAL BOARD OF DIRECTORS

This corporation shall have <u>three</u> (<u>3</u>) directors initially. The number of directors may be either increased or diminished from time to time by the By-Laws, but shall never be less than one (1). The names and addresses of the initial director(s) of the corporation are as follows:

NAME	Colin M. Charles				The state of the s
ADDRESS	9858 N E 169th Avenue				
CITY	Williston,	S		Florida	ZIP 32696
NAME	Constance Valerie Long				
ADDRESS	4000 S W 47th Street	Lot F7			
CITY	Gainesville,		STATE		ZIP 32608
NAME	Hartley W. Leacock, Jr.	·			
ADDRESS	5427 S W 4th Place				
CITY	Gainesville,	5	STATE	Florida	ZIP <sub>32607</sub>

### ARTICLE VIII - INCORPORATORS

The names and addresses of the incorporators signing these Articles of Incorporation are as follows:

NAME	0.11		
ADDRESS	Colin M. Charles 9858 N E 169th Avenue	enger en	<u> </u>
CITY	Williston	STATE Florida	ZIP 32696
NAME	Constance Valerie Long		
ADDRESS		F7	
CITY	Gainesville	STATE Florida	ZIP 32608
NAME	Hartley W. Leacock, Jr.		
ADDRESS	5427 S W 4th Place		
CITY	Gainesville	STATE Florida	ZIP 32607

The unders	igned incorporator(s) has	ave executed these.	Articles of Incorpor	ration this	ei	ghth	
day of	February	<u>*</u>	2002	**		adarig saab	
			01	1.			

Colis M. Charles (Signature)

Coustone V. Jawes S. (Signature)

## CERTIFICATE OF DESIGNATION REGISTERED AGENT/ REGISTERED OFFICE

2002 FEB 18 AM IO: 17
SECRETARY OF STATE
TALLAHASSEE FLORIDA

Shared Dreams Productions, Inc.
(name of corporation)
rsuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted:
e above corporation, organized under the laws of the State of Florida with its registered office
indicated in the Articles of Incorporation
4300 N. W. 23rd Avenue, Suite #34
Gainesville, Florida 32614-7050
s named Gary A. McClain

located at the aforesaid address, as its registered agent to accept service of process within this

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

(Date)

state.