Polooolog697 TRANSMITTAL LETTER

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

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SUBJECT:	ritement Print	ls "club"	NetWORK	
	(Proposed corpor	rate name - must include sur	Ex) 7 _S 8	
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			1939年	
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Enclosed is an origin	at and one (1) copy of the article	CS Of Incorporation and	a check for:	
EL 200 00	F7 \$70.75	□ \$78.75	☐ \$87.50 gH 5	
\$70.00	☑ \$78.75	Filing Fee	Filing Fee,	
Filing Fee	Filing Fee & Certificate of Status	& Certified Copy	Certified Copy	
	& Certificate of Status	& Cormica Copy	& Certificate of	
			Status	
		ADDITIONAL CO	· ·	
		1100111011110		
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FROM: Dorothy Thornton				
Name (Printed or typed)				
1 - 2 -				
300 N. Lakeland AUC.				
Address				
		4		
	Orlando Flor	1da 37809	5	
	City,	State & Zip		
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IINT LEAM MZ				
Daytime Telephone number				

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

186/88 60M



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

February 28, 2002

DOROTHY THORNTON 300 N. LAKELAND AVE. ORLANDO, FL 32805

SUBJECT: XCITEMENT PRINTS "CLUB" NETWORK

Ref. Number: W02000005855

We have received your document for XCITEMENT PRINTS "CLUB" NETWORK and your check(s) totaling \$78.87. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock.

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6878.

Alan Crum Document Specialist New Filing Section

Letter Number: 802A00012388

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)
ARTICLE 1 NAME The name of the corporation shall be: XCitement Prints (Club) Network
INC,
ARTICLE II PRINCIPAL OFFICE
The principal place of business/mailing address is: 300 M, Lakel And Ave. ORlando Fla
mailing Address > P.O. BOX 134, 32804 Orlando, Flq.
ARTICLE III PURPOSE
The purpose for which the corporation is organized is: 40 Obtain OWNErShip and
to protect my rights of ownership, to operate
The state of the s
The number of shares of stock is:
The number of shares of stock is: 10 Construes in the sturness in the sturne
ARTICLE V INITIAL OFFICERS DIRECTORS The name(s) and address(es): Dorothy Thorndon
The name(s) and address(es): Dorothy Thornson
300 N. Lake Land Ave Orlando, F19=32805
ARTICLE VI REGISTERED AGENT
The name and Florida street address registered agent are:
Dorothy Thorndon
300 N. Lake land Ave orlando Fla.
ARTICLE VII INCORPORATOR
The name and address of the Incorporator are:
Dorothy Thornton

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 performence of my duties, and I am familiar with and accept the
obligations of my position as registered agent.
SO-05-5 Colored Williams
Signature/Registered Agent . Date
Nosothy Thornton 2-20-02
Signature/Incorporator Date