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# PARUS CORPORATE FILING SERVICE

3320 S.W. 87 AVENUE

MIAMI, FLORIDA (305)552-5973

TERESA ROMAN (TALLAHASSEE REPRESENTATIVE)

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. LIVE EVENTS INC.

(Corporation Name)

(Document #)

2.

(Corporation Name)

(Document #)

3.

(Corporation Name)

(Document #)

4.

(Corporation Name)

(Document #)

☒ Walk in ☒ Pick up time 2.00

☒ Certified Copy

☐ Mail out ☐ Will wait

☐ Photocopy

☐ Certificate of Status

FILED

RECEIVED

02 APR -2 PM 3:26

02 APR -2 AM 10:50

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
DIVISION OF CORPORATE REGISTRATION  
TALLAHASSEE, FLORIDA

| NEW FILINGS                         |                   |
|-------------------------------------|-------------------|
| <input checked="" type="checkbox"/> | Profit            |
| <input type="checkbox"/>            | NonProfit         |
| <input type="checkbox"/>            | Limited Liability |
| <input type="checkbox"/>            | Domestication     |
| <input type="checkbox"/>            | Other             |

| AMENDMENTS               |                                       |
|--------------------------|---------------------------------------|
| <input type="checkbox"/> | Amendment                             |
| <input type="checkbox"/> | Resignation of R.A., Officer/Director |
| <input type="checkbox"/> | Change of Registered Agent            |
| <input type="checkbox"/> | Dissolution/Withdrawal                |
| <input type="checkbox"/> | Merger                                |

| OTHER FILINGS            |                  |
|--------------------------|------------------|
| <input type="checkbox"/> | Annual Report    |
| <input type="checkbox"/> | Fictitious Name  |
| <input type="checkbox"/> | Name Reservation |

| REGISTRATION/<br>QUALIFICATION      |                     |
|-------------------------------------|---------------------|
| <input checked="" type="checkbox"/> | Foreign             |
| <input checked="" type="checkbox"/> | Limited Partnership |
| <input checked="" type="checkbox"/> | Reinstatement       |
| <input checked="" type="checkbox"/> | Trademark           |
| <input checked="" type="checkbox"/> | Other               |

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\*\*\*\*78.75 \*\*\*\*78.75

Examiner's Initials

## **ARTICLES OF INCORPORATION**

*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:**

LIVE EVENTS INC.

### **ARTICLE II PRINCIPAL OFFICE**

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

5200 Blue Lagoon Drive, suite # 120, Miami, FL, 33126

### **ARTICLE III SHARES**

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

1000 shares

### **ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS**

**The name and address of the initial registered agent is:**

**Agent:** Juan Carlos Pardo

**Address:** 5200 Blue Lagoon Drive, suite # 120, Miami, FL, 33126

### **ARTICLE V INCORPORATOR(S)**

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

**Incorporator:** Juan Carlos Pardo

**Address:** 5200 Blue Lagoon Drive, suite # 120, Miami, FL, 33126

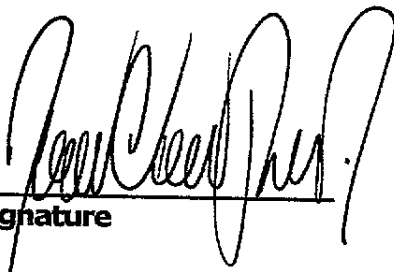
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**ARTICLE VI DIRECTOR(S)**

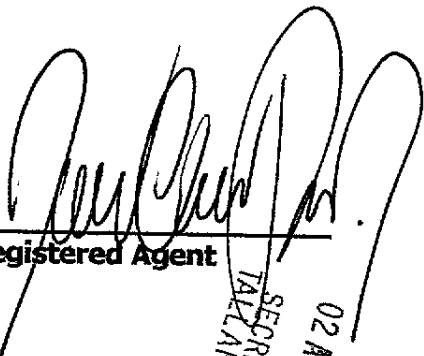
**The name and street address(es) of the director(s) to these Articles of Incorporation is(are):**

**Incorporator:** Juan Carlos Pardo  
**Address:** 5200 Blue Lagoon Drive, suite # 120, Miami, FL, 33126

**The undersigned incorporator(s) has (have) executed these Articles of Incorporation this 1<sup>st</sup> day of April of 2002.**

  
\_\_\_\_\_  
**Signature**

**Having been named as registered agent and to accept service of process for the above stated corporation at 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 related to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.**

  
\_\_\_\_\_  
**Registered Agent**

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