

Division of Corporations

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Florida Department of State
Division of Corporations
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TO:

Division of Corporations
Fax Number : (850) 205-0381

From:

Account Name : ACCOUNTING & BEYOND
Account Number : I19990000223
Phone : (813) 998-9800
Fax Number : (813) 998-9801

FLORIDA NON-PROFIT CORPORATION

IMAGEBLOCKS, INC.

Certificate of Status	0
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

IMAGEBLOCKS, INC.**ARTICLE II PRINCIPAL OFFICE**

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

P.O. BOX 6391, BRANDON, FLORIDA 33508-6391**ARTICLE III SHARES**

The number of shares of stock that this corporation is authorized to have outstanding at any one time is (1,000).

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

CHRISTINE L. PASTRANA
5303 WATSON RD.
RIVERVIEW, FLORIDA 33569

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

CHRISTINE L. PASTRANA
5303 WATSON RD.
RIVERVIEW, FLORIDA 33569

ARTICLE V BOARD OF DIRECTORS AND OFFICERS

The initial Board of Directors shall consist of a total of 2 person(s). The name and address(es) of the person(s) who shall serve as the initial director(s) and officer(s) are:

President and Director
MAX MARTIN
567 BELTED KINGFISHER DRIVE NORTH
PALM HARBOR, FLORIDA 34683

Vice-President and Director
CHRISTINE L. PASTRANA
5303 WATSON RD.
RIVERVIEW, FLORIDA 33569



Signature/Incorporator

4/23/02

Date

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.



Signature/Registered Agent

4/23/02

Date

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