

TRANSMITTAL CENTER
PO2000106788

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

SUBJECT: Perception, Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

800008097418--3
-09/30/02--01034--016
*****78.75 *****78.75

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00
Filing Fee

☒ \$78.75
Filing Fee
& Certificate of Status

☐ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: William Smith /Sipes
Name (Printed or typed)

531 B Campus St.

Address

Celebration, FL 34747

City, State & Zip

407-566-0331

Daytime Telephone number

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
02 SEP 30 PM 2:18

SMITH OCT 03 2002

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:
Perception, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is:
531 B Campus St.
Celebration, FL 34747

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
A production company (film and still photography)

ARTICLE IV SHARES

The number of shares of stock is:
1000

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):	
William Smith Sipes	William Houston Sipes, Jr.
531 B Campus St.	105 B Devonshire Sq.
Celebration, FL 34747	Jackson, TN 38305
President	Secretary/Treasurer

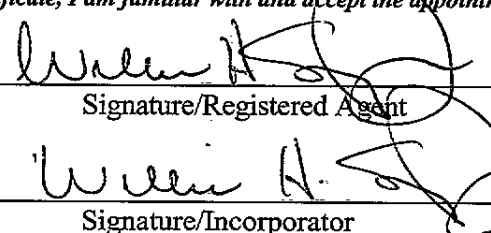
ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:
William Smith Sipes
531 B Campus St.
Celebration, FL 34747

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:
William Smith Sipes
531 B Campus St.
Celebration, FL 34747

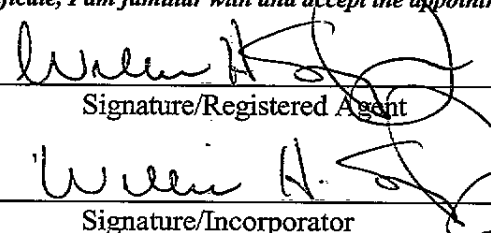
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

9/19/02

Date



Signature/Incorporator

9/19/02

Date

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