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(F	Requestor's Name)
(A	Address)
·	Address)
(0	city/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(E	Business Entity Name)
(E	Occument Number)
Certified Copies	Certificates of Status
Special Instructions to Filing Officer:	
Office Hea Only	
	Office Use Only



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103 N.MERIDIAN STREET, LOWER LEVEL TALLAHASSEE, FL 32301 222-1173 FILING COVER SHEET ACCT. #FCA-14 DATE: **REF. #:** RTICLES OF INCORPORATION () ARTICLES OF AMENDMENT () ARTICLES OF DISSOLUTION () ANNUAL REPORT () TRADEMARK/SERVICE MARK () FICTITIOUS NAME () FOREIGN QUALIFICATION () LIMITED PARTNERSHIP () LIMITED LIABILITY () REINSTATEMENT () MERGER () WITHDRAWAL () CERTIFICATE OF CANCELLATION () UCC-1 () UCC-3 () OTHER: STATE FEES PREPAID WITH CHECK# AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED: COST LIMIT: \$ PLEASE RETURN: () CERTIFIED COPY () CERTIFICATE OF GOOD STANDING

Examiner's Initials

() CERTIFICATE OF STATUS

CORPDIRECT AGENTS, INC. (formerly CCRS)

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:

JERK ABOUT PRODUCTIONS, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 101 Spring Valley Loop, Altamonte Springs, Florida 32714.

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: to engage in any form of business allowed by the laws of the State of Florida.

ARTICLE IV SHARES

The number of shares of stock is: 100 shares of common stock.

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):
Steve Robertson - Co-President, Secretary and Director
Gary Wallace - Co-President, Treasurer and Director

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

NRAI Services, Inc. 526 E. Park Avenue Tallahassee, FL 32301

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Donald M. Woodard, Esq. Greenberg Traurig, LLP 3290 Northside Parkway, Suite 400

Atlanta GA 30327

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 familial with and accept the appointment as registered agent and agree to act in this capacity

Assistant Servetan

rtificate, I am familial with and accept the appointment as registered agent and agree to act in this capacity

Sharon M. Knov

Signature/Registered Agen

Signature/Incorporator

Date

Date