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SECRETARY OF STATE ALLANIASSEE, FLORIDA

DIVISION OF CORFGRATION

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LAZARUS CORPORATE FILI	NG SERVICE			
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TERESA ROMAN (TALLAHASSEE R	EPRESENTATIVE)			
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1. SELENA PRO (Corporation Name)	ODUCTIO	BER(S) (if known): NS IN (Document #)		
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Fictitious Name	Limited Partners	hip		
Name Reservation	Reinstatement			
	Trademark			
	Other		Examiner's Initials	
CD2E031(9/92)		-		

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:

SELENE PRODUCTIONS, INC.

SECRETARY OF STATE TALLAPASSEE, FLORIDA

ARTICLE II - PRINCIPAL OFFICE

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

6801 N.W. 77 AVENUE # Suite 109 Mi Ami 18h 33166

ARTICLE III -SHARES

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

ARTICLES IY -INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

SONIA SELENE ROMAN

6801 N.W. 77 AUBWUE Svite # 109 Mismi, Fl 33166

ARTICLE V - INCORPORATOR

The name and street address of the incorporator to these Articles of Incorporation is: South SELENE ROMAN
6801 N.W. 7) AVENUE SUITE #109 MIAMI, FL 33166
The undersigned incorporator has executed these Articles of Incorporation this 27 day of 2003 Signature
ARTICLE VI- DIRECTOR(S) ARTICLE VI- DIRECTOR(S)
The name(s) and street address(es) of the director(s) to these Articles of lincorporation is (are):
SONIA SELENE ROMAN - PRESIDENT.
CANLOS E. Molina - Vice - Program. 6801 N.W. 77 ADENUE Suite 109 Miami, EL 33166.
CERTIFICATE OF DESIGNATION OF REGISTERED AGENT / REGISTERED OFFICE
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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 Signature