# Division 300004 56 Grate Priproduced the

## Florida Department of State Division of Corporations

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To:

Division of Corporations

Fax Number : (850)205-0381

From:

Account Name : FAS-T CORP. AGENTS, INC.

Account Number: 071001002335 Phone: (305)599-0839 Fax Number: (305)716-0346

#### FLORIDA PROFIT CORPORATION OR P.A.

ESKEH ENTERTAINMENT, INC.

D. WHITE APR 2 5 2003

Certificate of Status0Certified Copy1Page Count01Estimated Charge\$78.75

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### ARTICLES OF INCORPORATION

#### Eskeh Entertainment, Inc.

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SECRETARY OF STATE

The undersigned incorporator, for the purpose of forming a corporation under the Florida AHASSEE FLORIDA

Business Corporation Act however address to the purpose of forming a corporation under the Florida AHASSEE FLORIDA Business Corporation Act, hereby adopts the following Articles of Incorporation.

#### ARTICLE I NAME

The name of the corporation shall be: Eskeh Entertainment, Inc. This shall be a for-profit corporation established within the state of Florida.

#### ARTICLE II PRINCIPAL OFFICE

The initial mailing address of this corporation shall be: 21091 NW 22 Ave, suite 232, Miami, FL 33056

#### ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 100,000 at \$ .01 par value

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS The name and Florida street address of the initial registered agent is: Bon Accounting, 1100 NE 125 street, suite 216, North Miami, FL 33161

#### ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are: Dwayne M Somersall, 21091 NW 22 Ave, suite 232, Miami, FL 33056

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 FOR BON ACCOUNTING.

Signature of Registered Agent