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Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number : (850) 205-0381

From:

Account Name : INCORPORATETIME.COM, INC.

Account Number : 119990000221

Phone : (631) 224-9004

Fax Number : (631)218-9522

FLORIDA PROFIT CORPORATION OR P.A.

Gemini Productions, Inc.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$70.00

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ARTICLES OF INCORPORATION

THE UNDERSIGNED INCORPORATION 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:

Gemini Productions, Inc.

ARTICLE II -PRINCIPAL OFFICE

The principal place of business & mailing address of this corporation shall be

6530 Summer Cove Dr. Riverview, FL 33569

ARTICLE III -SHARES

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

500 shares at \$.01 par value

ARTICLE IV -INITIAL OFFICERS/DIRECTORS:

President/Treasurer/Secretary/Director: Kara Matthews-Mullis
6530 Summer Cove Dr., Riverview, FL 33569
V. President/Director: Michael Mullis 6530 Summer Cove Dr., Riverview
FL 33569

ARTICLE V -INITIAL REGISTERED AGENT AND STREET ADDRESS:

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

Kara Matthews-Mullis 6530 Summer Cove Dr., Riverview, FL 33589

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SECRETARY OF STATE
SECRETARY OF STATE
ANNASSEE, FLORIDA

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ARTICLE VI-INCORPORATOR:

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

Kwaish

Kerry Walsh 35 Carleton Avenue Islip Terrace, NY 11752

Kerry Waish, incorporator

6/35/03

Having been named registered agent and to accept service of process for the above stated corporation as the place designated in this certificate! 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.

Kom Matthews-Mullis, Registered Agent

10-25-03 Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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