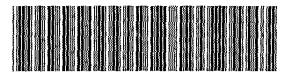
# P03000097407

- (Requestor's Name)				
(Address)				
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(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
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Consideration to Filling Officer				
Special Instructions to, Filing Officer:				

Office Use Only



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TALLAHASSEE, FLORIE,

JS 3. 20021

# TRANSMITTAL LETTER

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

SUBJECT:	ECT: Latin Mall Inc.			
SOBILE 1.	(PROPOSED CORPOR	ATE NAME – <u>MUSTINCL</u>	UDESUFFIX)	
Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation and	a check for:	
☐ \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status  PY REQUIRED	
FROM:		atin Mall Inc. e (Printed or typed)	<del></del> .	
	14067 Ospn	ey Links Rd. Apt. 417 Address	<del></del>	
	Orlando, Fl. 32837 City, State & Zip			
	. = •	7-925-6420 Telephone number		

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



### FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

July 15, 2003

WJOY ENTERTAINMENT CORP. 14067 OSPREY LINKS RD APT 417 ORLANDO, FL 32837

SUBJECT: WJOY ENTERTAINMENT CORP.

Ref. Number: W03000020021

We have received your document for WJOY ENTERTAINMENT CORP. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6927.

Tracy Smith
Document Specialist
New Filings Section

Letter Number: 903A00041604

# 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:

"Latin Mall Inc.

#### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 14067 Osprey Links Rd. Apt. 417 Orlando, Fl. 32837 Phone # 407-925-6420 and 407-925-6448.

#### ARTICLE III **PURPOSE**

The purpose for which the corporation is organized is:

This Corporation for the pupose of providing products informations, prices, facilities and other information to the viewers of Centra Florida.

#### ARTICLE IV **SHARES**

The number of shares of stock is: 1.000

## **INITIAL OFFICERS AND/OR DIRECTORS**

List name(s), address(es) and specific title(s):

William Gutierrez 14067 Osprey Links Rd. Apt. 417 Orlando, Fl. 32837 Joydi Figueroa 14067 Osprey Links Rd. Apt. 417 Orlando, Fl. 32837

#### ARTICLE VI REGISTERED AGENT

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

Joydi Figueroa 415 West Vine St. Kissimmee, Fl. 34741 407-925-6448

#### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

William Gutierrez 14067 Osprey Links Rd. Apt. 417 Orlando, Fl. 32837

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

Agust 27,2003

Date

Agust 27,2003

Date

Signature/Incorporator