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(R	equestor's Name)		
(Address)			
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(Ci	ity/State/Zip/Phone	e #)	
PICK-UP	MAIT	MAIL	
(Business Entity Name)			
(Document Number)			
Certified Copies	Certificates	of Status	
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## TRANSMITTAL LETTER

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

SUBJECT:	United Impai	•	
<del>-</del>	(PROPOSED CORPORA'	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	rinal and one (1) copy of the artic	cles of incorporation and	l a check for:
\$70.00	\$78.75	□ \$78.75	□ \$87.50
Filing Fee	Filing Fee & Certificate of Status	Filing Fee & Certified Copy	Filing Fee, Certified Copy & Certificate of Status
		ADDITIONAL CO	
FROM:	Fare F.		<u> </u>
	Name (Printed or typed)  5217 Cedarberd Drine #1		
		Address Adorida 3	339/9
	City,	State & Zip	

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

Daytime Telephone number

AND FILED

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	04 MJG 3U PH 4. 20
ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	SECRETARY OF STATE TALL AHASSEE, FLORIDA
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)  ARTICLE I NAME  The name of the corporation shall be: United Impact	Media, Inc.
ARTICLE II PRINCIPAL OFFICE  The principal place of business/mailing address is: 52/7 Cadar fort Myers,	
ARTICLE III PURPOSE  The purpose for which the corporation is organized is:	ral Corporation
ARTICLE IV SHARES The number of shares of stock is: /ooo	· · · · · · · · · · · · · · · · · · ·
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s):  Jane F. Poimer, 52/7 Cedar bend & President	Drive, Fort Hyers, F
ARTICLE VI REGISTERED AGENT  The name and Florida street address (P.O. Box NOT acceptable) of the re  Jake F. Pririer, 5217 Cadarbard	egistered agent is: Fort Myers  Drive, Fort Myers
ARTICLE VII INCORPORATOR  The name and address of the Incorporator is:  Take F. Foirmer, 5217 Cedar bond	Drives Port Hyers, 1
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Signature/Incorporator