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TRANSMITTAL LETTER

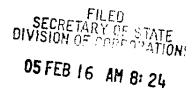
Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

SUBJECT: Movie S	Stunt Incorporated		
	(PROPOSED CORPOR	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the art	ticles of incorporation and	a check for:
\$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	\$78,75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate o Status
		ADDITIONAL CO	
FROM: Wil	fred L. Lee	e (Printed or typed)	
	1 No. (Fr	e (Trimed of typed)	
	221 North Hogan Street #347		
		Address	
	Jacksonville, Florida, 32202	, State & Zip	
	904-534-4268		
	Daytime	Telephone number	

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

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:

Movie Stunt Incorporated

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 221 North Hogan Street #347

Jacksonville, Florida 32202

ARTICLE III __ PURPOSE

The purpose for which the corporation is organized is:

ARTICLE IV SHARES

The number of shares of stock is:

One Share

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Wilfred L. Lee 221 North Hogan Street #347 Jacksonville, Florida 32202

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Shirley Jones 221 North Hogan Street #347 Jacksonville, Florida 32202

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Wilfred L. Lee 221 North Hogan Street #347 Jacksonville, Florida 32202