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NECKELARY OF STATE

T. Burch JUL 1 2083

TRANSMITTAL LETTER

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

SUBJECT: MIAI	MI IDOL, INCORPORATED			
	(PROPOSED CORPORAT	E NAME – <u>MUST INCL</u> I	UDE SUFFIX)	
England on an original	.i	16:	a ahaala Cam	
Enclosed are an ong	inal and one (1) copy of the artic	les of incorporation and	a cneck for:	
□ \$70.00	□ \$78.75	☑ \$78.75	\$87.50	
Filing Fee	Filing Fee	Filing Fee	Filing Fee,	
	& Certificate of Status	& Certified Copy	Certified Copy	
			& Certificate of	
		ADDITIONAL CO	Status	
	ADDITIONAL COPY REQUIRED			
	•	· · · · · · · · · · · · · · · · · · ·		
TTD 0.3.6	WILMA WILCOX			
FROM:	Name (Printed or typed)			
rano (rinador speci)				
14730 NW 10 AVENUE				
Address				
	Miami, FL 33168			
City, State & Zip				
(786) 385-2146				
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:

MIAMI IDOL, INCORPORATED

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

14730 NW 10 AVENUE Miami, Florida 33168

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TALENT COORDINATOR AND PROMOTER FOR YOUTH MUSIC & THEATER

ARTICLE IV SHARES

The number of shares of stock is: 250 SHARES

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

WILMA WILCOX, PRESIDENT AL WILCOX, VICE-PRESIDENT LORRAINE RENTZ, SECRETARY/TREASURER

ARTICLE VI REGISTERED AGENT

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

DAVID CHIVERTON 946 NW 46 STREET MIAMI FL 33127

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

WILMA WILCOX 1770 NW 187th Street Miami, Florida 33056

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

Signature/Incorporator

June 27 2005

Date

05 JUN 30 AM 7:

DE JUN 30 AT 1:30 DECRETARY OF STATE ALL AHASSEE, FLORIDA