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(Re	equestor's Name)	And the second second		
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# **COVER LETTER**

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

SUBJECT:	INNERVIBE INCORPORATED			
Enclosed are an orio	(PROPOSED CORPORA)			
\$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	
FROM:	WINSTON FRANCIS Name (Printed or typed)  4541 BROOK DRIVE Address			
WEST PALM BEACH, FLORIDA, 33417 City, State & Zip				
	561-906- Daytime T	elephone 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)

FILED

# ARTICLE I NAME

The name of the corporation shall be:

INNERVIBE INCORPORATED

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

4541 BROOK DRIVE WEST PALM BEACH, FLORIDA 33417

# ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO MAXIMIZE PROFITS FROM DISC JOCKEYING SERVICES PROVIDED TO CLIENTS.

## ARTICLE IV SHARES

The number of shares of stock is:

100

# ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

WINSTON FRANCIS 4541 BROOK DRIVE WEST PALM BEACH **FLORIDA**, 33417

### ARTICLE VI REGISTERED AGENT

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

WINSTON FRANCIS 4541 BROOK DRIVE WEST PALM BEACH **FLORIDA, 33417** 

### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

WINSTON FRANCIS 4541 BROOK DRIVE WEST PALM BEACH **FLORIDA, 33417** 

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I plan familiar-with and accept the appointment as registered agent and agree to act in this capacity

Signature/Registered/Agent

Signature/Incorporato

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10 · 30 · 06

Date

10 · 30 · 06