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COVER LETTER

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

SUBJECT: "A SENSATIONA (PROPOSED CORPORAT		Lnc. Lude suffix)	
Enclosed are an original and one (1) copy of the article \$70.00 \$78.75 Filing Fee Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status	
SUMPLISE FZ.	E (Printed or typed) OKIONA PK (Address) 33351 State & Zip	BUS, FLURID	06 NOV 14 PH 2: 18

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

(954) 829-6519 Daytime Telephone number

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: "" ENSATITIONAL EVENT Inc."
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is:
8446 W. Oakland Pk. Blud. Sunrise 97. 3335)
The purpose for which the corporation is organized is:
Organizing and Planning Events and PARTY Planning
The number of shares of stock is: 50 Shows
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s):
Cuica falle - 1493 to. BEXLEY Pk. DR owner/precident. Beliay Bch. 97.
ARTICLE VI REGISTERED AGENT
The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Cura Colle-1493 E. Buxley Pk. De. Selvay Bch. 77 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: 33445
CUCA CULL - 1493 E. BOXLEY PK. DR. BULLAY BUL. M. 3344 S. Having been named for registered agent to accept service of process for the above stated corporation at the place designated in this
Having been named by registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiarly with and accept the appointment as registered agent and agree to act in this capacity
Signature/Registered Agent Date $100 - 9 - 06$
Signature/Incorporator Date

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