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REPART OF STATE OF SEATONS 2286 NOV 20 AN IO 52

LAZARUS CORPORATE FILING SERVICE

3320 SW 87TH AVENUE

MIAMI, FL 33165 (305) 552-597	73	•	
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CORPORATION NAME(S) & DOCUME	NT NUMBER(S), (if	known):	
1. CAVIAR PRODUCTIO	NS INC.	· · · ·	
(Corporation Name)	(Document #)		
2.	•		
(Corporation Name)	(Document #)		
3.			
(Corporation Name)	(Document #)	,	
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4. (Corporation Name)	(Document #)		
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OTHER FILINGS	REGISTRATION/O	QUALIFICATION	
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ARTICLES OF INCORPORATION

The undersigned Incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I - NAME

The name of the corporation shall be:

CAVIAR Productions Inc.

ARTICLE II - PRINCIPAL OFFICE

The principal place of business and mailing of this corporation shall be:

7905 EAST Drive Suite 12-A Mianni Beach, FL 33141

ARTICLE III -SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100

ARTICLES IV-INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

VONATAN COLON

7903 East brice Suite 12-A

Miami Beach, FL, 37141

SECRETARY OF STATE OIVISION OF CORPORATIONS

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ARTICLE V - INCORPORATOR

The name and street address of the incorporator to these Articles of Incorporation is: VONATAN COLON

7905 East Drive Suite 12-A Miami Beach, Fl 33141

The undersigned incorporator has executed these Articles of Incorporation this 17 day of November ____ 2006.

Signature

ARTICLE VI- DIRECTOR (S)

The name(s) and street address (es) of the director(s) to these Articles of Incorporation is (are):

YONATAN COLON - President

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

Having been named as Registered Agent and to accept service of process for the above stated corporation at place designated in this certificate, I hereby accept the appointment as Registered Agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes related to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as Registered Agent.

Rogistered Agent Signature