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## **COVER LETTER**

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

SUBJECT:	ell your 11	/ Conce	
	(PROPOSED CORPORA)	FE NAME – <u>MUST INCL</u>	<u>WDE SUFFIX</u> )
Enclosed are an orig	inal and one (1) copy of the artic	cles of incorporation and	l a check for:
\$70.00 Filmg 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 PY REQUIRED
FROM:	Jeanne S	NON (Printed or typed)	-
	8137 Lake	Crowell Address	Circle
	Orlando (City,	FL 328;	36
	407-35 Daytime T	(-5893	

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:  Sell Your TV Concept Naw, Inc.	2007 MAR -8 PM 2: 12 SECRETARY OF STATE TALLAHASSEE, FLORIDA
ARTICLE II PRINCIPAL OFFICE  The principal place of business/mailing address is:  8137 Lake Crowell Circle  Orlando, FL 32836  ARTICLE III PURPOSE	
The purpose for which the corporation is organized is: to help others develop, pitch, and se	ell their show concept
ARTICLE IV SHARES The number of shares of stock is:	
Orlando, FL 32856  President  ARTICLE VI REGISTERED AGENT  The name and Florida street address (P.O. Box NOT acceptable) of the registered age  Jeanne Tappas Simoli  8137 Lake Crowell Circle	Lake Crowell Charles Jim Lake Crowell Charles TL 32836 identions:
Orlando, FL 32836  ARTICLE VII INCORPORATOR  The name and address of the Incorporator is:  Jeanne Tappas Simon  8137 Lake Crowell Circle:  (Vando FL 32836	*****
Having been named as registered agent to accept service of process for the above stated corporation a certificate, I am familiar with and accept the appointment as registered agent and agree to act in this cap Signature/Registered Agent  Signature/Incorporator  Signature/Incorporator  Signature/Incorporator	t the place designated in this