

Prorida Department of State

Division of Corporations Public Access System

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Division of Corporations

Fax Number : (850) 205-0381

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number : 072450003255 Phone : (305)634-3694

Fax Number : (305)633-9696

FLORIDA PROFIT/NON PROFIT CORPORATION

all special effects, inc.

Certificate of Status	Û
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ARTICLES OF INCORPORATION

OF

ALL Spreide EFFECTS INC.

The undersigned subscriber to the Articles of Incorporation, natural person, competent to contract, desiring to form a corporation under the laws of the State of Florida, hereby makes, subscribes and acknowledges this certificate for that purpose, as follows:

ARTICLE

The name of the corporation is:

ALL SpeciAL EFFECTS, INC.

ARTICLE II

The purpose for which the corporation is formed is to engage in the conduct of any lowful business activity.

ARTICLE III

This corporation is to have perpetual existence.

ARTICLEIV

The maximum number of shares of stock that this Corporation is authorized to have outstanding at one time are One Hundred (100) shares at no par value.

This instrument prepared by.

Douglas W. Oesterle 9506 S Red Road Miami, Fl 33156

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EMPIRE CORP KIT

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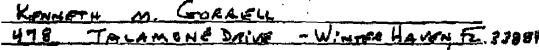
	ARTICLEY
	the initial registered and principal office of this Corporation is
9506	Sa. RED ROAD
MiAMI	Fublica 33156
	,
	ARTICLE VI
The name of the initia	ARTICLE VI al Registered Agent of this Corporation la:

ARTICLE VII

The Corporation shall have One (1) director initially. The number of directors may be increased from time to time by the By-Laws but shall never be less than one.

ARTICLE VIII

The name and address of the initial director of this Corporation is:



ARTICLE IX

The name and address of the person signing these Articles of Incorporation is:

WENNETH M. GORRELL WITH HAVEN

478 TALAMONE DOING FOR \$3884

ARTICLE X

This Corporation reserves the right to smend or repeat any provision contained in these Anticles of Incorporation or any Amendment hereto, and any right contented upon the shareholders is subject to this reservation.

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CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE SERVICE OF PROCESS WITHIN THIS STATE NAMING AGENT WHOM THE PROCESS MAY BE SERVED

In pursuance of Chapter 48.091, Florida Stantes, the following is submitted in compliance with this Acr

FIRST: ALL Speech LEFFECTS, Tale.

under the laws of the State of Florida with its principal office as indicated in the Articles of

Incorporation:

9506 So. Reso RoAn

SECOND: The name of the initial Registered Agent of this Corporation is:

as its agent to accept service of process within the state.

ACKNOWLEDGMENT:

Having been named to accept service of process for the above stated Corporation, at place designated in this conflicate, I hereby accept to act in this capacity and agree to comply with the provisions of this Act relative to keeping this office.

Overfor a. Centralo

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