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(Requestor's Name)				
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(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
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COVER LETTER

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

SUBJECT: WIDAS TO	OUCH MEDIAWORKS, IN PROPOSED CORPORATE	NG. E NAME – <u>MUST INCLU</u>	DE SUFFIX)
Enclosed is an original a	and one(1) copy of the Article	es of Incorporation and	a check for :
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate
		ADDITIONAL CO	PPY REQUIRED
FROM: Oronde Giddings Name (Printed or typed)			
North Lauderdale, FL 33068 City, State & Zip			-
			_
	_		

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

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The name of the corporation shall be: MIDAS TOUCH MEDIAWORKS, INC.

SECRETARY OF STATE TALLAHASSEE. FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 8140 S.W. 24TH ST. #302, N. LAUDERDALE, FL 33068

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To engage in any activities or business permitted under the Laws of the United States and Florida.

ARTICLE IV SHARES

The corporation shall have the authority to issue 1,000 shares of common stock, par value \$.01 per share.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

The initial Board of Directors shall consist of 4 members. The number of directors may be increased of decreased from time to time by vote of the Board of Directors, but in no case shall the number of directors be less than one. The name and address of the directors constituting the initial Board of Directors are:

ORONDE GIDDINGS / President/CEO - 8140 S.W. 24TH ST. #302, N. LAUDERDALE, FL 33068

ARTICLE VI REGISTERED AGENT AND STREET ADDRESS

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

ORONDE GIDDINGS, 8140 S.W. 24TH ST. #302, N. LAUDERDALE, FL 33068

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is: ORONDE GIDDINGS, 8140 S.W. 24TH ST. #302, N. LAUDERDALE, FL 33068

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

2/21/08 Date 2/21/08