P08000083432

| • |
|---|
| (Requestor's Name) |
| (Address) |
| (Address) |
| (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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Office Use Only



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SECRETARY OF STATE

TO THE STATE OF TH

T. CLINE

SEP 1 1 2008

EXAMINER



FLORIDA DEPARTMENT OF STATE Division of Corporations

August 8, 2008

TARA MUNROE 815 W. BOYNTON BEACH BLVD. #6205 BOYNTON BEACH, FL 33426

SUBJECT: MEDIA MASTERS Ref. Number: W08000037494

We have received your document for MEDIA MASTERS and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name listed in both the Certificate of Conversion and Articles of Organization is not distinguishable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of a name is not acceptable. Please select a new name and make the correction in appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

The name of the corporation must be listed in the conversion. The articles of incorporation must be filled out completely articles i-vii.,

You must list at least one incorporator with a complete business street address.

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6020.

Tammi Cline Regulatory Specialist II

Letter Number: 108A00045227



FLORIDA DEPARTMENT OF STATE Division of Corporations

September 2, 2008

TARA MUNROE 815 W. BOYNTON BEACH BLVD. #6205 BOYNTON BEACH, FL 33426

SUBJECT: MEDIA MASTERS PUBLISHING, INC

Ref. Number: W08000037494

We have received your document for MEDIA MASTERS PUBLISHING, INCand your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

You must list at least one incorporator with a complete business street address.

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6020.

Tammi Cline Regulatory Specialist II

Letter Number: 808A00048312

COVER LETTER

| TO: Registration Division of O | Section Corporations | | · |
|---|--|---|---|
| SUBJECT: | ladia Ha (Name of Resultin | Sters, Inc | on) |
| | icate of Conversion, A | rticles of Incorporation | n, and fees are submitted to ation" in accordance with s. |
| Please return all cor | respondence concernin | g this matter to: | |
| Tara L | (Contact Person) | | PRASSER (C |
| Media | a Masters, I (Firm/Company) | Inc. | TARY OF STATE |
| 815 W. Bo | Unton Beach | Blvd #62 | LOS |
| Boynton | Beach, Fl City, State and Zip Code) | 33426 | |
| For further informat | ion concerning this ma | tter, please call: | |
| Tara L. (Name of Co | Munrou ontact Person) | | o9 – SSI 4 aytime Telephone Number) |
| Enclosed is a check | for the following amou | int: | |
| □\$105.00 Filing Fees | \$113.75 Filing Fees and Certificate of Status | \$113.75 Filing Fees and Certified Copy | \$122.50 Filing Fees, Certified Copy, and Certificate of Status |
| STREET ADDRES | SS: | MAILING A | ADDRESS: |
| Registration Section Division of Corporat Clifton Building 2661 Executive Cent | tions | Registration Division of C P. O. Box 63 Tallahassee, | Corporations 27 |

Tallahassee, FL 32301

Certificate of Conversion

For

"Other Business Entity"

Into

Florida Profit Corporation

This Certificate of Conversion <u>and attached Articles of Incorporation</u> are submitted to convert the following "Other Business Entity" into a Florida Profit Corporation in accordance with s. 607.1115, Florida Statutes.

| | 1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate |
|------|---|
| | of Conversion is: |
| / | Media Masters 608/78/12000 |
| | (Enter Name of Other Business Entity) |
| | 2. The "Other Business Entity" is a <u>Fictitious Name</u> ## 17 |
| | (Enter entity type. Example: limited liability company, limited partnership, sole |
| | proprietorship, general partnership, common law or business trust, etc.) |
| | |
| | first organized, formed or incorporated under the laws of Florida |
| | (Enter state, or if a non-U.S. entity, the name of the country) |
| | on $05-28-08$ |
| | (Enter date "Other Business Entity" was first organized, formed or incorporated) |
| | 3. If the jurisdiction of the "Other Business Entity" was changed, the state or country under the laws of which it is now organized, formed or incorporated: 4. The name of the Florida Profit Corporation as set forth in the attached Articles of Incorporation: Media Mashus Publishing, The (Enter Name of Florida Profit Corporation) |
| | 5. If not effective on the date of filing, enter the effective date: (The effective date: 1) cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State; AND 2) must be the same as the effective date listed in the attached Articles of Incorporation, if an effective date is listed therein.) |
| | Page 1 of 2 |
| | ictitionis name is pledia Masters. I would |
| , j | a to become incorporated using the name |

| Signed this 1 day of | August | ,20 <u> </u> | |
|---|---------------------------|--|-------------|
| Required Signature for Florida | a Profit Corporat | tion: | |
| Signature of Chairman, Vice Chabeen selected, an Incorporator: Printed Name: Tara L. Y | • | • | rs have not |
| Required Signature(s) on behalf signature(s).] | of Other Busines | s Entity: [See below for required | |
| Signature: Jara J. Printed Name: Jara L. | Munroe | _Title: _ President | |
| Signature:Printed Name: | | Title: | 13000 |
| Signature:Printed Name: | | Title: | AH ASSE |
| Signature:Printed Name: | * - 70 1 - 100 | Title: | E P SH |
| Signature:Printed Name: | | Title: | <u> </u> |
| Signature:Printed Name: | | Title: | |
| If Florida General Partnership o Signature of one General Partner. | or Limited Liabili | ty Partnership: | |
| If Florida Limited Partnership o Signatures of <u>ALL</u> General Partne | | y Limited Partnership: | |
| If Florida Limited Liability Com Signature of a Member or Authoriz | | | |
| All others: Signature of an authorized person. | Taras | L. Murroe | |
| Fees: Certificate of Conversion: Fees for Florida Articles of Certified Copy: Certificate of Status: | | \$35.00 \$70.00 \$8.75 (Optional) \$8.75 (Optional) | |

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: Hedia Hasters, Inc. or Media Masters Publishing, Inc. **ARTICLE II PRINCIPAL OFFICE**The principal place of business/mailing address is: 815 W. Boynton Beach Blvd, Suite #6205 Boynton Beach, Fl 33426 ARTICLE III PURPOSE The purpose for which the corporation is organized is: To set up a company as a legal entity ARTICLE IV SHARES The number of shares of stock is: 150 % 250 INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s): Tara L. Munroe, President 815 W. Boynton Beach Blud, Suite # 6285 Boynton Beach, Fl 33426 REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Tara L. Munroe, president 815 W. Boynton Reach Blvd, Suite #6205

Boynton Beach, Fl 33426

ARTICLE VII INCORPORATOR The name and address of the Incorporator

| The <u>name and address</u> of the incorporator is. | |
|--|---|
| ********************** | |
| 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 | |
| Tara L. Munroe 08-06-08 Signature/Registered Agent Date | |
| Signature/Incorporator $09-06-08$ Date 36 | |
| ALEXED SEP | 1 CMANUS |
| The registered agent + ENDE TO THE TOTAL THE Same | STATE AND ADDRESS OF THE PARTY |
| Incorporator are the same | |
| Tara L. Munroe | |
| 815 W. Baynton Beach Rlud | |
| Suite # 6205 | |
| Boynton Beach, FR 33426 | ٠ |
| 561-369-5514 | |
