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ZEORETARY OF STATE
TALLAHASSEF FLORE

COVER LETTER

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

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SUBJECT:	Crystal Klear Studio and Duplication,Inc			
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	<u>UDE SUFFIX</u>)	
Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation and	l a check for:	
☐ \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy		
		ADDITIONAL CO	PY REQUIRED	
FROM:		al Jackson		
		e (Printed or typed) ngton Estates Drive		
		Address		
Jacksonville, Florida 32209 City, State & Zip				
	(904 Daytime T)674-4480 elephone number		
	duvalhb20	02@yahoo.com d for future annual report i	notification)	
	E-man address. (10 be use	a ioi iatare amuai report i	iourication)	

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

In compliance with Chapter 607, F.S.

ARTICLE I NAME

The name of the corporation shall be: Crystal Klear Studio and Duplication, Inc

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: 5274 Ramona Blvd, Jacksonville, Florida 32205.

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Music and Media Production

ARTICLE IV SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is 1,000. The par value of each share of stock is no par value (0.00).

ARTICLE V OFFICERS/DIRECTORS

The initial directors of the corporation are:

Jamal Jackson, 5258 Washington Estate Dr., Jacksonville, Florida 32209

The initial officers of the corporation are:

Jamal Jackson, President

ARTICLE VI REGISTERED AGENT

The name and Florida Street address of the registered agent is: Jamal Jackson, 5258 Washington Estates Dr, Jacksonville, Florida 32209. Located in the County of Duval.

ARTICLE VII INCORPORATOR

The name and street address of the incorporator to these Articles of Incorporation is Jamal Jackson 5274 Ramona Blvd, Jacksonville, Florida 32205.

I hereby accept the appointment as registered agent and agree to act in this capacity.

Signature:

Jamal Jackedn

Date: 6-5-09

Signature:

Jamal Jackson, Incorporator

Date: 6-5-09

The document was prepared by: Jamal Jackson 5274 Ramona Blvd , Jacksonville, Florida 32205. 904-674-4480

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