Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H11000127483 3)))



H110001274833ABC.

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number : 072450003255 Phone : (305) 634-3694 Fax Number : (305)633-9696

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address:

FLORIDA PROFIT/NON PROFIT CORPORATION

artistic entertainment inc.

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$78.75

Electronic Filing Menu

Corporate Filing Menu

https://efile.sunbiz.org/scripts/efilcovr.exe

5/9/2011

PAGE 01/02

EMPIRE CORP KIT

9696889998

£0:60 TT0Z/60/90



ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

FILED

<u> </u>	poration shall be: PRINCIPAL OFFICE	AINMENT INC. SECRETARY OF Mailing address, if different is FE. F	S: 7
	Principal street address	Mailing address, if different is:	i di
37	755 NW 203 ST		
W	IAMI, FL 33055		
RTICLE III P			
	nich the corporation is organized is: LAWFUL BUSINESS		
MAL WAD WEL	- LAWFUL BUGINESS		
RTICLE IV	SHARES		
	es of stock is: 1,000		
Nome and Titl	<u>INTTIAL OFFICERS AND/OR DIRECT</u>	TORS	
Address:	3755 NW 203 ST	Name and Title:	
I have wante	MIAMI, FL 33055	Address:	_
Name and Titl	:VP-REGINALD WILLIAMS	Name and Title:	
Address:	3755 NW 203 ST	Address:	
	MIAMI, FL 33055		_
Name and Titl	ĉ:	Name and Title:	_
Address:		Address:	_
			_
	<u>REGISTERED AGENT</u> Ida street address (P.O. Box NOT acceptable	le) of the registered agent is:	
- wante waa riom	VIRGINIA WILLIAMS		
Name:	315 N.W. 56 ST	<u></u>	
	MIAMI, FL 33127		
Name:			
Name: Address: RTICLE VII 1	NCORPORATOR		
Name: Address: PTICLE VII I prome and address	ess of the Incorporator is:		
Name: Address: PYICLE VII 1 name and addr Name:	ess of the Incorporator is: VIRGINIA WILLIAMS		
Name: Address: PTICLE VII 1 name and address	ess of the Incorporator is:		
Name: Address: ename and address: Address: Address:	ess of the Incorporator is: VIRGINIA WILLIAMS 315 N.W. 56 ST MIAMI, FI 33127 I as registered agent to accept service of pro-	ocess for the above stated corporation at the place designate s registered agent and agree to act in this capacity	ed in
Name: Address: PTICLE VII I ename and address: Address: Address:	ess of the Incorporator is: VIRGINIA WILLIAMS 315 N.W. 56 ST MIAMI, FI 33127 I as registered agent to accept service of pro-	s registered agent and agree to act in this capacity	ed in
Name: Address: ename and address: Address: Address:	ess of the Incorporator is: VIRGINIA WILLIAMS 315 N.W. 56 ST MIAMI, FI 33127 I as registered agent to accept service of pro-	s registered agent and agree to act in this capacity 5-09-2011	ed in

H11000127483