

P 12000002083

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

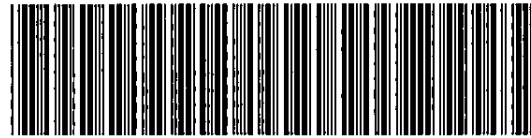
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

J. Shivers JAN 09 2012

11-67595

Regarding: smsh vision corp

I would like to request that this corporation go into effect on January 2, 2012.

Thank you,



Marco Portuondo
239-245-0494
413 NE 15th Ave
Cape Coral FL 33909

2012 JAN -6 PM 1:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

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:

SmashVision CORP

ARTICLE II PRINCIPAL OFFICE

Principal street address
413 NE 15th Ave
Cape Coral FL 33909

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Video Production and Promotion

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Marco Portuondo (President)
Address: 413 NE 15th Ave
Cape Coral FL 33909

Name and Title: _____
Address: _____

Name and Title: Mark Ascuitto (Treasurer/Secretary)
Address: 23494 Westchester Blvd
Port Charlotte FL 33980

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: Marco Portuondo
Address: 413 NE 15th Ave
Cape Coral FL 33909

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Marco Portuondo
Address: 413 NE 15th Ave
Cape Coral FL 33909

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
2012 JAN -6 PM 1:06
FILED

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


Required Signature/Registered Agent

12/20/11
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.


Required Signature/Incorporator

12/20/11
Date