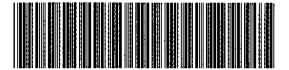
P14000055109

(Requ	iestor's Name)	
(Addr	ess)	
(Addr	ess)	
(City/s	State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(Busii	ness Entity Nar	ne)
(Docu	ıment Number)	
Certified Copies	Certificates	s of Status
Special Instructions to Fil	ina Officer	

Office Use Only



500261379715

06/23/14--01008--011 **87.50

FILED

SECRETARY OF TAKE
ALL MARKSHIP FOR PRINA

N 06/25/14

COVER LETTER

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

SUBJECT: IVIE	DIATIME INC.		
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the ar	ticles of incorporation and	d 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 of Status
		ADDITIONAL CO	OPY REQUIRED
V	ann Ralu		
FROM: 1	ann Balu Nam	e (Printed or typed)	
8	500 20 ST., SUIT	TE 690232	
V	ERO BEACH, FL		7
	City	State & Zip	
77	72-321-7225		
- +	Daytime 1	elephone number	

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

SALES@NEEDPRICE.COM

E-mail address: (to be used for future annual report notification)

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

0500 00 OT	NCIPAL OFFICE Principal street address		Mailing address, if different is:
8500 20 ST., SUITE 690232		PO BOX 232	
VERO BEACI	H, FL 32966	VERO BEACH, FL 32966	
ARTICLE III PUR The purpose for which t	POSE the corporation is organized is: Media A	Advertising],
			THE THE
ARTICLE IV SHA	ARES 40,000,000		D W 2: 25
ARTICLE V INI	TIAL OFFICERS AND/OR DIRECTOR		
ARTICLE V INI			Kurt Jordan, VP
ARTICLE V INI	TIAL OFFICERS AND/OR DIRECTOR		Kurt Jordan, VP 8500 20 ST., SUITE 690232
ARTICLE V INI	rial officers and/or director Yann Balu ,CEO	Name and Title:	8500 20 ST., SUITE 690232
ARTICLE V INIT	Yann Balu ,CEO 8500 20 ST., SUITE 690232 VERO BEACH, FL 32966	Name and Title: Address:	8500 20 ST., SUITE 690232 VERO BEACH, FL 32966
ARTICLE V INIT	Yann Balu ,CEO 8500 20 ST., SUITE 690232 VERO BEACH, FL 32966	Name and Title: Address: Name and Title:	8500 20 ST., SUITE 690233 VERO BEACH, FL 32966
ARTICLE V INIT	Yann Balu ,CEO 8500 20 ST., SUITE 690232 VERO BEACH, FL 32966	Name and Title: Address: Name and Title: Address:	8500 20 ST., SUITE 690232 VERO BEACH, FL 32966
Name and Title Address Name and Title Address	Yann Balu ,CEO 8500 20 ST., SUITE 690232 VERO BEACH, FL 32966	Name and Title: Address: Name and Title: Address:	8500 20 ST., SUITE 690232 VERO BEACH, FL 32966

Address ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box Not Pann Balu Address: Address: VERO BEACH, FL	E 690232
The name and Florida street address (P.O. Box No. Name: Name: Address: 8500 20 ST., SUIT	E 690232
The name and Florida street address (P.O. Box No.	E 690232
Name: Yann Balu 8500 20 ST., SUIT	E 690232
Address: 8500 20 ST., SUIT	E 690232
ARTICLE VII INCORPORATOR	M 23
The <u>name and address</u> of the Incorporator is:	
Name: Alain Jallon	
Address: 8500 20 ST., SUI	TE 690232
VERO BEACH,	FL 32966
Having been named as registered agent to accept this certificate, I am familiar with and accept the a	service of process for the above stated corporation at the place designated appointment as registered agent and agree to act in this capacity 06/20/2014
Required Stgnature/Regi	stered Agent Date
I submit this document and affirm that the facts s document to the Department of State constitutes a	stated herein are true. I am aware that the false information submitted in the piral degree felony as provided for in s.817.155, F.S.
	06/20/2014
Required Signature/Inc	Corporator Date

4 - 3 - 3