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05/15/2003 04:51

#2558 P.001/003

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To: Division of Corporations
Fax Number : (850)617-6381

From: Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
Account Number : I20000000019
Phone : (305)552-5973
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Email Address: _____

**FLORIDA PROFIT/NON PROFIT CORPORATION
MEDIA ROOM CORP.**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

15 MAY -4 PM 3:51

15 MAY -4 PM 12:52

MD 55

ARTICLES OF INCORPORATION

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

H15000108784

ARTICLE I NAME: The name of the corporation is:

MEDIA ROOM CORP.

ARTICLE II PRINCIPAL OFFICE:

The principal street address and mailing address is:

6740 NW 114 Ave #725

Doral, FL 33178

ARTICLE III SHARES: The number of shares of stock is: 100**ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:**

PAOLA ANDREA MARIN (P)

JUAN HENAO (VP)

ELSIE STINSON (TREASURER)

ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:

The name and Florida street address (PO Box not acceptable) of the registered agent is:

Paola Andrea Marin

6740 NW 114 Ave #725

Doral FL 33178

ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:

PAOLA ANDREA MARIN

6740 NW 114 Ave #725

Doral FL 33178

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15 MAY -4 PM 12:52
FILED
CLERK OF CIRCUIT COURT
DADE COUNTY, FLORIDA

03/15/2033 04:51

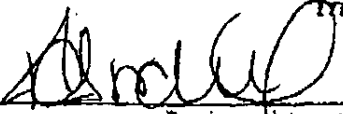
#2558-P.003/003

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Required Signatures:

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.



Registered Agent

05/04/15

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.



Incorporator

05/04/15

Date

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