

04/16/2033 08:37

#3859 P.001/003

015000049654

Florida Department of State  
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.**

(((H15000134504 3)))



H150001345043ABCX

**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 : LAZARUS CORPORATE FILING SERVICE, INC.  
Account Number : I20000000019  
Phone : (305)552-5973  
Fax Number : (305)675-5944

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

Email Address: \_\_\_\_\_

RECEIVED

15 JUN -5 PM 4:13

DEPT OF STATE  
TALLAHASSEE, FLORIDA

DEPT OF STATE  
TALLAHASSEE, FLORIDA

15 JUN -5 PM 5:17

FILED

FLORIDA PROFIT/NON PROFIT CORPORATION  
ONE MEDIA GROUP INC

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

10 8 45 4

04/16/2033 05:38

Jun. 5. 2015 9:48AM

#3859 P. 002/003

H15000134504

### 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: ONE MEDIA GROUP INC

#### ARTICLE II PRINCIPAL OFFICE

Principal ~~street~~ address  
15400 SW 34TH STREET

MIAMI, FL 33185

Mailing address, if different is:

15400 SW 34TH STREET

MIAMI, FL 33185

#### ARTICLE III PURPOSE

The purpose for which the corporation is organized is: MEDIA AND ADVERTISING SERVICES

#### ARTICLE IV SHARES

The number of shares of stock is: 100%

#### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: MARIELA MASTRANGELO

Address: PRESIDENT

15400 SW 34TH STREET

MIAMI, FL 33185

Name and Title: PABLO BOADA

Address: VIC-PRESIDENT

15400 SW 34TH STREET

MIAMI, FL 33185

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

FILED  
15 JUN -5 PM 5:17  
CLERK OF DISTRICT COURT  
TALLAHASSEE, FLORIDA

H15000134504

04/16/2033 05:38

Jun. 5. 2015 9:48AM

#3859 P.003/003  
No. 9203 P. 3

H15000134504

Name and Title:	_____	Name and Title:	_____
Address	_____	Address:	_____
	_____		_____
	_____		_____

**ARTICLE VI REGISTERED AGENT**

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

Name: MARIELA MASTRANGELO  
Address: 15400 SW 34TH STREET  
MIAMI, FL 33185

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: MARIELA MASTRANGELO  
Address: 15400 SW 34TH STREET  
MIAMI, FL 33185

**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: 06-05-2015 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

*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*

_____	06-05-2015
Required Signature/Registered Agent	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.*

_____	06-05-2015
Required Signature/Incorporator	Date

H15000134504