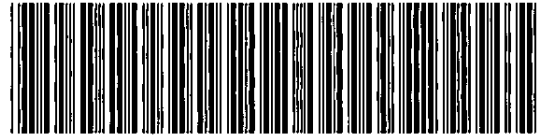


P15000071304



900274793299

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only

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DIVISION OF CORPORATIONS  
15 AUG 11 AM 11:28  
19 BROADWAY  
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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
15 AUG 11 PM 2:47

CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 732206 8059315

AUTHORIZATION :

*Lynne Deane*

COST LIMIT : \$70.00

ORDER DATE : August 3, 2015

ORDER TIME : 2:46 PM

ORDER NO. : 732206-001

CUSTOMER NO: 8059315

DOMESTIC FILING

NAME: ASCENSION.DIGITAL INC.

EFFECTIVE DATE:

XX ARTICLES OF INCORPORATION  
       CERTIFICATE OF LIMITED PARTNERSHIP  
       ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

       CERTIFIED COPY  
XX PLAIN STAMPED COPY  
       CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Melissa Zender - EXT. 62956

EXAMINER'S INITIALS: \_\_\_\_\_



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 11, 2015

CSC

SUBJECT: ASCENSION.DIGITAL INC.  
Ref. Number: W15000053936

**RESUBMIT**  
Please give original  
submission date as file date.

We have received your document for ASCENSION.DIGITAL INC. and the authorization to debit your account in the amount of \$70.00. However, the document has not been filed and is being returned for the following:

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is L13000016017 (ASCENSION DIGITAL LLC).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Terri J Schroeder  
Regulatory Specialist II

Letter Number: 915A00016896

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DIVISION OF CORPORATIONS

COVER LETTER

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

SUBJECT: DIGITAL ASCENSION INC.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and 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 COPY REQUIRED**

FROM: \_\_\_\_\_  
Name (Printed or typed)

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State & Zip

\_\_\_\_\_  
Daytime Telephone number

000933 @ comcast.net  
E-mail address: (to be used for future annual report notification)

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

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

**ARTICLE I NAME** DIGITAL ASCENSION INC.

The name of the corporation shall be: \_\_\_\_\_

**ARTICLE II PRINCIPAL OFFICE**

Principal street address \_\_\_\_\_

Mailing address, if different is: \_\_\_\_\_

7907 Washington Road, West Palm Beach, FL 33405

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: \_\_\_\_\_

SELLING DIGITAL MEDIA, AUDIO FILES, CD & DVD AUDIO

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DIVISION OF CORPORATIONS  
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**ARTICLE IV SHARES**

The number of shares of stock is: 1500

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

Name and Title: Redon Ajoye/Director Name and Title: \_\_\_\_\_

Address: 7907 Washington Road Address: \_\_\_\_\_

West Palm Beach, FL 33405 \_\_\_\_\_

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

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

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

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

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: Corporation Service Company  
 Address: 1201 Hays Street  
Tallahassee, FL 32301

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**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Redon Ajyer  
 Address: 7907 Washington Road  
West Palm Beach, FL 33405

**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: 08-07-2015 at 1:24 PM (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  
 Corporation Service Company

By: M. Zender **Melissa Zender** 8/10/15  
 Required Signature/Registered Agent **Asst. Vice President** 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.

X Redon Ajyer  
 Required Signature/Incorporator

8-7-2015  
 Date