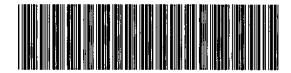
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(Re	equestor's Name)		
(Ac	ldress)		
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PICK-UP	☐ WAIT	MAIL	
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(Dogument Number)			
Certified Copies	Certificates	s of Status	
Special Instructions to	Filing Officer:		
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NOV 3 0 2015 S. GILBERT

COVER LETTER

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

SUBJECT: LEGACY M	EDIA, INC.			
Jobo Lett.	(PROPOSED CORPO	RATE NAME – <u>MUST IN</u>	CLUDE SUFFIX)	
Enclosed is an original a	and one (1) copy of the Arti	cles 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	
		ADDITIONAL CO	PY REQUIRED	
FROM:	TIM HANEY, CHITWOOD & CHITWOOD			
	Nam	e (Printed or typed)	-	
	5746 MARLIN ROAD, STE 500			
	Address			
	CHATTANOOGA, TN 37411			
	City, State & Zip			
	423.892.4882			
	Daytime Telephone number			
,	thaney@chitwoods.com	uture annual report potificatio	-n)	

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

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

LEGACY MEDIA, INC.

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ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

1010 Seminole Drive, #1708 Ft Lauderdale, FL 33304

ARTICLE III DURATION

The corporation has a perpetual duration.

ARTICLE IV PURPOSE

The corporation is organized for any all lawful business.

ARTICLE V SHARES

The number of shares of stock is 100.

ARTICLE VI INITIAL REGISTERED AGENT

The name and Florida street address of the registered agent is:

William T. Coontz 1010 Seminole Drive, #1708 Ft Lauderdale, FL 33304

ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

William T. Coontz 1010 Seminole Drive, #1708 Ft Lauderdale, FL 33304

Having been named as registered agent to accept services 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.

William T. Coontz/Registered Agent

11 10 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.

William T. Coontz /Incorporator

11/10/15 Date