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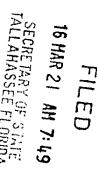
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COVER LETTER

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

SUBJECT: Highlan	ds Arts & Music, Inc.		
50b0EC1	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the art	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	& Certificate of Status
		ADDITIONAL CO	OPY REQUIRED
FROM: Ch	ris McDonald Noel Nam	e (Printed or typed)	
74]	Lake June Road		
		Address	
Lak	e Placid, FL 33852		
	City	, State & Zip	
863	-260-0643		
_	Daytime 7	Telephone number	
chri	s@noelsonline.com		
	E-mail address: (to be use	d for future annual report	notification)

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

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ARTICLES OF INCORPORATION

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

FILED 16 MAR 21 AM 7: 49

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Name and Title: Name and Title:_ SECRETARY OF STATE TALLAHASSEE FLORIDA Address Address: ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Chris McDonald Noel Name: 74 Lake June Road Address: Lake Placid, FL 33852 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Chris McDoanld Noel Name: 74 Lake June Road Address: Lake Placid, FL 33852 ARTICLE VIII EFFECTIVE DATE: Effective date, if other than the date of filing: (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 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.