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 : 1200000000019

: (305)\$52-5973

Phone

: (305)675-5944

Fax Number

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

Email Address:_

FLORIDA PROFIT/NON PROFIT CORPORATION SKY HIGH FIREWORKS CORP

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

ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:

	ARTICLE	II PRINCIPAI	LOFFICE:	
19	The principal str	reet address and m		
Hia	leah FL	33015		
		<u> </u>		
RTICLE II	I SHARES: The	number of shares	of stock is:	00
ART			S AND/OR OFFICE	RS:
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			ENT AND STREET	
he name ar	nd Florida street add	ress (PO Box not a	ENT AND STREET	
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he name ar	nd Florida street add RISTOPI 7/6 BOB	ress (PO Box not a HER 30 LINK	cceptable) of the regis DRIVE	
The name ar	nd Florida street add RIS TOPI	ress (PO Box not a HER 30 LINK	cceptable) of the regis DRIVE	
The name are $\frac{CH}{IG}$	RISTOPIO	ress (PO Box not a HER BOLINK FL,	cceptable) of the regis DRIVE	stered agent

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 Unite

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 \$.817.155, F.S.

Incorporator Late