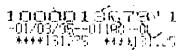


Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314



SUBJECT: MENTAL AQUEDUCT RECORDING STUDIOS, INC.

(Proposed corporate name - must include suffix)

tur : \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	\$122.50 Filing Fee & Certified Copy	\$131.25 Filing Fee, Certified Copy & Certificate	Tallbirden, Fl	95 22 -3 21	FILED
FROM:	<u>JOHN</u> Name	I C. JENKIN (printed or typed) - WOODROSE Address	······································	3-	3:42	**
	904-	NVILLE, FL. ity, State & Zip - 737 - 665 e Telephone number		,]4], 4	h15	

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





The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

MENTAL AQUEDUCT RECORDING STUDIOS, INC.

ARTICLE II PRINCIPAL OFFICE

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

3524 MORTON STREET JACKSONVILLE, FLORIDA 32217

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

ONE MILLION SHARES

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

JOHN C. JENKINS 9764 WOODROSE LN. JACKSONVILLE, FLORIDA 32257

ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

JOHN C. JENKINS 9764 WOODROSE LN. JACKSONVILLE, FLORIDA 32257

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

TWENTY SEVENTH DECEMBER 19 94.

Articles of Incorporation Filing Fee - \$35

Signature

CERTIFICATE OF DESIGNATION O REGISTERED AGENT/REGISTERED OFFICE

RSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, FLORIDA ATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATION OF THE STATEMENT OF THE ST ATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF ORIDA.

1. The name of the corporation is: MENTAL AQUEDUCT

RECORDING STUDIOS, INC.

2. The name and address of the registered agent and office is:

KSONVILLE, FL. 3225 (City/State/Zip)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered ε gent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.