D9700054057 TRANSMITTAL LETTER

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

97 JUN 18 AM 9:08

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

SUBJECT:	Ninth Hour Production (Proposed co	rporate name - must include	: suffix)	_
Enclosed is an original and one(1) copy of the articles of incorporation and a check for :				
S70.00 Filing Fee	\$78.75 Filing Fee & Certificate	□\$122.50 Filing Fee & Certified Copy ADDITIONAL CO	\$131.25 Filing Fee, Certified Copy & Certificate	
FROM:	Phil Moore Name (Pi	inted or typed)	1 REQUIRED	j
2761 Foxwood Ct. Address				
	Orlando, Fl. 32818 City, State & Zip God Money			
1,608,611,671_ 1—12551	(407) Daytime T	297-0622 elephone number	60000221 -06/19/37- *****78.1	67062 01002007 75 *****78.75

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

ARTICLES OF INCORPORATION

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

ARTICLE I

The name of the corporation shall be:

Ninth Hour Productions, Inc.

ARTICLE II PRINCIPAL OFFICE

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

P.O. Box 681118 Orlando, FL 32868-1118

ARTICLE III SHARES

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

100 Class A

INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Phil Moore 2761 Foxwood Ct. Orlando, FL 32818 INCORPORATOR

ARTICLE V

The name and address of the incorporator to these Articles of Incorporation are:

Phil Moore 2761 Foxwood Ct. Orlando, FL 32818

Signature/Incorporator

(An additional article must be added if an effective date is requested.)

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 agent 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 1 am familiar with and accept the obligations of my position as registered agent

Signature/Registered Agent