097 TAISMOTABLE 54 669

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

UBJECT: _ARCOIR	IS PRODUCTIONS (Proposed corpo	orate name - must include suff	nix) 000022180386 -06/20/9701021007 ****131.25 ****131.25
inclosed is an original ar	nd one(1) copy of the artic	les of incorporation and a	check for :
S70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate	S122.50 Filing Fee & Certified Copy ADDITIONAL CO	Filing Fee, Certified Copy & Certificate
FROM: _CARM	ELO D SANDOVAL Name (Prin	ted or typed)	SEEE FLI
<u>5563</u>	NW 193 Ln.	iress	32 ORIDA
_MIA/	MT , FT. 33055 City, Su	ate & Zip	
_626	Daytime Tele	DEN 2 0 1	5B

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

.505

ARTICLES OF INCORPORATION

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:

"ARCOIRIS PRODUCTIONS"

PRINCIPAL OFFICE ARTICLE II

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

5563 NW 193 Ln., MIAMI FL. 33055.

97 JIII 20 PH 2: 32

ARTICLE III **SHARES**

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

100. PROFIT ARTICLES ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS The name and address of the initial registered agent is:

Carmelo D. Sandoval 5563 NW 193 Ln Miami F1 33055

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

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

CARMELO D. SANDOVAL. 5563 NW 193 Ln.MIAMI, FL. 33055.

SUSANA A. SANDOVAL. 5563 NW 193 Ln.MIAMI, FL. 33055.

Notarization is not required

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1.	The name of the corporation is <u>Arcoiris</u> Production	ons Inc.
2.	The name and address of the registered agent and office is: Carmplo D. San dova/ (NAME) 5563 N W 193 L (P. O. Box or Mail Drop Box NOT ACCEPTABLE) Miami F 33055 (CITY/STATE/ZIP)	97 JUN 20 PH 2: 32 TALLANASSEL, FLORIDA

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

3-19-