

ACCOUNT NO.: 07210000032

REFERENCE: 862936 4353585

AUTHORIZATION :

COST LIMIT : \$ 70.00

ORDER DATE: June 19, 1998

ORDER TIME : 12:05 PM

ORDER NO. : 862936-005

CUSTOMER NO: 4353585

CUSTOMER: Michael Moskowitz, Esq

MICHAEL MOSKOWITZ, ESQ

70 Grand Street

500002566285-

River Edge, NJ 07661

DOMESTIC FILING

NAME:

CASINO RECORDS, INC.

EFFECTIVE DATE:

XX ARTICLES OF INCORPORATION

CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_ CERTIFIED COPY

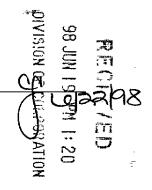
__ PLAIN STAMPED COPY __

____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Stacy L Earnest

EXAMINER'S INITIALS:

2544 W98-14182





FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State THOMINED

98 JUN 22 PM 2: 40
DIVISION OF CORPORATION

June 19, 1998

CSC NETWORKS 1201 HAYS STREET TALLAHASSEE, FL 32301

SUBJECT: CASINO RECORDS, INC.

Ref. Number: W98000014182

RESUBMIT

Please give original submission date as file date.

We have received your document for CASINO RECORDS, INC. and the authorization to debit your account in the amount of \$70.00. However, the document has not been filed and is being returned for the following:

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of a name is not acceptable. Please select a new name and make the correction in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6973.

Claretha Golden Document Specialist

Letter Number: 998A00034107

98 JUN 19 PH 3: 15



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: CASINO PRODUCTIONS, INC.

ARTICLE II PRINCIPAL OFFICE

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

1056 South Military Trail Deerfield Beach, FL 33442

ARTICLE III SHARES

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

1,000 shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Arrow Casino 1056 South Military Trail Deerfield Beach, FL 33442

FILING FEE: \$70.00

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):

Arrow Casino 1056 South Military Trail Deerfield Beach, FL 33442

The un	dersigned inc	orporator(s) has	have) executed these Articles of I	ncorporation thi
_17	_ day of	June	, 19 98 .	-
(An add	litional article	must be added i	f an effective date is requested.)	
		1 0		
,		1 Carr	rest.	
	—		Signature	
			Signature	***
	-		Signature	

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 OFFICH/REGISTERED AGENT, IN THE STATE OF FLORIDA.

Casino Productions, Inc,

1. The name of the corporation is: Casino Productions, Inc,	
2. The name and address of the registered agent and office is:	SECRETARY 98 JUN 19
Arrow Casino (NAME) 1056 South Military Trail	PH 3:
(P.O. Box or Mail Drop Box NOT ACCEPTABLE) Deerfield Beach, FL 33442 (CITY/STATE/IP)	TONS .
Having been named as registered agent and to accept service of process for corporation at the place designated in this certificate, I hereby accept the appointmagent and agree to act in this capacity. I further agree to comply with the provision relating to the proper and complete performance of my duties, and I am familiar with obligations of my position as registered agent.	ms of all statutes

DIVISION OF CORPORATIONS, P. O. BOX 6327, TALLAHASSEE, FL 32314

(SIGNATURE)

(DATE)