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(((H98000014725 9)))

DIVISION OF CORPORATIONS TO:

FAX #: (850)922-4001

FROM: EMPIRE CORPORATE KIT COMPANY

ACCT#: 072450003255

CONTACT: RAY STORMONT PHONE: (305)541-3694

FAX #: (305)541-3770

NAME: 7 OLE T.V. OF FLORIDA, INC.

AUDIT NUMBER..... H98000014725

DOC TYPE......FLORIDA PROFIT CORPORATION OR P.A.

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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:

OLE T.V. OF FLORIDA, INC.

ARTICLE II: PRINCIPAL OFFICE

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

16502 N. W. 52 AVE MIAMI, FL. 33014

ARTICLE III: SHARES

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

1,000

ARTICLE IV: INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

JUANITA ROSES 1315 GENOA STREET CORAL GABLES, FL. 3313-1

AND RODRIGUEZ ACCT. 1890 SW 57 AUE. #107 t198000014725

EMPIRE CORPORATE KIT

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ARTICLI: V: INCORPORATOR (S)

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

JUANITA ROSES 1315 GENOA STREET CORAL GABLES, FL. 33134

ARTICLE V(; DIRECTOR (S)

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

JUANITA ROSES, PRESIDENT 1315 GENOA STREET CORAL GABLES, FL. 33134

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

Incorporation this 6TH DAY OF AUGUST 1998.

Articles of Incorporation Filing Fee-\$35.00

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CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section: 607.0501 or 617.0505, 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 CLE T. V. OF FLORIDA, INC.
- 2. The name and address of the registered agent and office is:

JUANITA ROSES, PRESIDENT 1315 GENOA STREET CORAL GABLES, FL. 3313-1

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.

SIGNATURE

8-7-58

DATE

REGISTERED AGENT FILING FEE: \$35.00

98 AUG -7 AM 7: 45
SECRIL LANT OF STATE
THE ANASSEE, FLORIDA

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