TRANSMITTAL LETTER

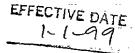
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Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

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UBJECT:	CineVision Network, Inc.		
	(Proposed con	porate name - must include su	ffix)
closed is an origina	l and one(1) copy of the artic	cles of incorporation and a	check for :
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	S122.50 Filing Fee & Certified Copy ADDITIONAL CO	\$131.25 Filing Fee, Certified Copy & Certificate PPY REQUIRED
FROM:	William W. Hallen		-
	Name	(Printed or typed)	Jo 9
	3030 N. Rocky Poi	nt Drive, #280	98 NOV
		Address	HAS:
	Tampa, FL	3607	ω
	Ci (813) 969-3049	ty, State & Zip	EE, FLORIES
	Daytime	Telephone number	

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 NAME

The name of the corporation shall be:

CineVision Network, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: 3030 N. Rocky Point Drive, #280, Tampa, FL 33607



ARTICLE III SHARES

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

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Kristi Neher Davisson 3030 N. Rocky Point Dr. W. #280, Tampa, FL 33607

ARTICLE V INCORPORATOR

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

William W. Hallenbeck, Jr.

3030 N. Rocky Point Dr. W. #280, Tampa, FL 33607

ARTICLE VI EFFECTIVE DATE

1999

Signature/Incorporator

11/12/98

Date

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

Signature/Registered Agent

11/17/98

Date