(SAMPLE LETTER OF TRANSMITTAL)

Date April 6, 1999

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

P99 00000 35450

Re: TWIN VISION, Inc.
(name of corporation)

FILED
99 APR 15 AM 11:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Gentlemen:

Enclosed please find the original and one copy of Articles of Incorporation, together with my check in the amount of $122.50.

This represents the cost of the Filing Fees, Certified Copy of Articles of Incorporation and Fee for Registered Agent Designation for the above named corporation.

Very truly yours,

600002840456--8
-04/15/99--01086--016
****122.50 *****78.75

James Kohn
(individual's name)

TWIN VISION, INC
(name of corporation)

MAILING ADDRESS OF CORPORATION

312 SW 78th Avenue
No. Lauderdale, FL 33068

PHONE
(954) 720-2077
Area Code Number Ext.

Seminole Form 215: Trans. Letter (7-90)

F. CHESSER APR 19 1999

ARTICLES OF INCORPORATION

of

Twin Vision, INC.

(name of corporation)

The undersigned subscriber(s) to these Articles of Incorporation, natural person(s) competent to contract, hereby form a corporation under the laws of the State of Florida.

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TALLAHASSEE, FLORIDA

ARTICLE I - CORPORATE NAME

The name of the corporation is: Twin Vision, INC

ARTICLE II - DURATION

This corporation shall exist perpetually unless dissolved according to Florida law.

ARTICLE III - PURPOSE

The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida. Cable Communications installations - field engineering

ARTICLE IV - CAPITAL STOCK

The corporation is authorized to issue five hundred shares (500) of Common Dollar(s) ($ 1.00) par value Common Stock, which shall be designated "Common Shares."

ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT

The principal office, if known, or the mailing adress of the corporation is:

NAME	Twin Vision, Inc.		
ADDRESS	312 SW 78th Avenue		
CITY	North Lauderdale,	FLORIDA	ZIP 33068

The name and street address of the Initial Registered Agent of this Corporation is:

NAME	James Kohn		
ADDRESS	312 SW 78th Avenue		
CITY	North Lauderdale	FLORIDA	ZIP 33068

ARTICLE VI - INITIAL BOARD OF DIRECTORS

This corporation shall have two (2) directors initially. The number of directors may be either increased or diminished from time to time by the By-Laws, but shall never be less than one (1). The names and addresses of the initial director(s) of the corporation are as follows:

NAME	James Kohn		
ADDRESS	312 SW 78th Avenue		
CITY	North Lauderdale	STATE FL	ZIP 33068
NAME	Tricia Kohn		
ADDRESS	312 SW 78th Avenue		
CITY	North Lauderdale	STATE FL	ZIP 33068
NAME			
ADDRESS			
CITY		STATE	ZIP

ARTICLE VII - INCORPORATORS

The names and addresses of the incorporators signing these Articles of Incorporation are as follows:

NAME	James Kohn		
ADDRESS	312 SW 78th Avenue		
CITY	No. Lauderdale	STATE FL	ZIP 33068
NAME	Tricia Kohn		
ADDRESS	312 SW 78th Avenue		
CITY	No. Lauderdale	STATE FL	ZIP 33068
NAME			
ADDRESS			
CITY		STATE	ZIP

IN WITNESS WHEREOF, the undersigned subscriber(s) have executed these Articles of Incorporation this 6th day of April, 1999.

X James Kohn (Seal)
James Kohn

X Tricia Kohn (Seal)
Tricia Kohn

(Seal)

STATE OF FLORIDA)
) SS
COUNTY OF Broward)

before me, a Notary Public authorized to take acknowledgments in the State and County set forth above, personally appeared:

X James Kohn / James Kohn Signature	personally known to notary Form of Identification
X Tricia Kohn / Tricia Kohn Signature	personally known to notary Form of Identification
Signature	Form of Identification

known to me and known to be the person(s) who executed the foregoing Articles of Incorporation, who acknowledged before me that they executed these Articles of Incorporation, that I relied upon the form of identification of the above named person as indicated opposite each name, and that an oath (was)(was not) taken.

NOTARY NUMBER, STAMP SEAL

Witness my hand and official seal in the County and State last aforesaid this 6th day of April, 19 99

Notary Signature

LISA J. Von Hoffen
Printed Notary Signature

Lisa J. Von Hoffen
Notary Public, State of Florida
Commission No. CC 551491
My Commission Exp. 04/30/2000
1-800-3-NOTARY
Fla. Notary Service & Bonding Co.

CERTIFICATE AND ACKNOWLEDGEMENT
OF REGISTERED AGENT

CERTIFICATE OF REGISTERED AGENT

OF

Twin Vision, Inc.

(name of corporation)

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted:
The above corporation, desiring to organize under the laws of the State of Florida with its registered office as indicated in the Articles of Incorporation

at 312 SW 78th Avenue
North Lauderdale, FL 33068

has named James Kohn

located at the aforesaid address, as its Registered Agent to accept service of process within this state.

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TALLAHASSEE, FLORIDA

ACKNOWLEDGEMENT

Having been named as Registered Agent to accept service of process for the above stated corporation at the place designated in this certificate, and being familiar with the obligations of that position, I hereby accept to act in this capacity, and agree to comply with the provisions of Florida Law in keeping open said office.

James Kohn
(registered agent) James Kohn