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

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SUBJECT:	DIGITAL (Proposed corpo	ARTS, INC.	fix)
EFFECTIVE BY	9		- - -
Enclosed is an origina	al and one(1) copy of the article	es of incorporation and a	check for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	□\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED
FROM:	Daniel Aleksic Name (Printed or typed)		
	Address Orlando, Florida 32837		99 APR 16 SECRETARY TALLAHASSE
	-	State & Zip 51-9855	

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

Daytime Telephone number

cles NDD

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:

DIGITAL ARTS, Inc.

7-1-97

ARTICLE II PRINCIPAL OFFICE

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

Principal Place of Business: 4701 Hearthside Drive

Orlando, Florida 32837

U.S.A.

Mailing Address:

ARTICLE III SHARES

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

100,000 shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Daniel Aleksic 4701 Hearthside Drive Orlando, Florida 32837 U.S.A.

ARTICLE V INCORPORATOR

The <u>name and address</u> of the incorporator to these Articles of Incorporation are:

Daniel Aleksic 4701 Hearthside Drive Orlando, Florida 32837 U.S.A. ARTICLE VI EFFECTIVE DATE

The effective date of this company shall be:

JULY 1, 1999

Signature/Incorporator

04-12-99

Dat

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

<u>--12-399</u>

Date

99 APR 16 PN 12: 13
SECRETARY OF STATE
ALLYSISE FLORIDA