Division of Corporations
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Florida Department of State

Division of Corporations
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Katherine Harris, Secretary of State

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To:

Division of Corporations

Fax Number : (850) 922-4001

From:

Account Name : FILINGS, INC.
Account Number : 072720000101
Phone : (850)385-6735
Fax Number : (850)297-0217

99 MAY 19 PM 1: 3'
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA PROFIT CORPORATION OR P.A.

EXHIBITOR RESOURSES, INC.

Certificate of Status	O STATE AND ASSESSMENT AND ASSESSMENT AND ASSESSMENT AS
Certified Copy	0
Page Count	04
Estimated Charge	\$70.00

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99 MAY 19 PM 1: SECRETARY OF STA TALLAHASSEE, FLOR

ARTICLES OF INCORPORATION

EXHIBITOR RESOURSES, INC.

THE UNDERSIGNED SUBSCRIBER TO THESE ARTICLES OF INCORPORATION A NATURAL PERSON COMPETENT TO CONTRACT, HEREBY FORMS A CORPORATION UNDER THE LAWS OF THE STATE OF FLORIDA.

THE NAME OF THIS CORPORATION IS:

EXHIBITOR RESOURSES, INC.

THE PRINCIPAL PLACE OF BUSINESS OF THIS CORPORATION SHALL BE:

PEMBROKE PINES, FL 33075

ARTICLE II - DURATION
THIS CORPORATION IS TO EXIST PERPETUALLY, COMMENCING ON THE DATE OF EXECUTION AND ACKNOWLEDGEMENT OF THESE ARTICLES.

THIS CORPORATION IS ORGANIZED FOR THE PURPOSE OF TRANSACTING ANY OR ALL LAWFUL BUSINESS.

THIS CORPORATION IS AUTHORIZED TO ISSUE ONE THOUSAND (1000) SHARES OF \$1.00 PAR VALUE COMMON STOCK.

ARTICLE V - PRE-EMPTIVE STOCK
EVERY SHAREHOLDER, UPON SALE FOR CASH OF ANY NEW STOCK OF THIS
CORPORATION OF THE SAME KIND, CLASS, OR SERIES AS THAT WHICH HE
ALREADY HOLDS, SHALL HAVE THE RIGHT TO PURCHASE HIS PRO-RATA SHARE
OF (AS NEARLY AS MAY BE DONE WITHOUT ISSUANCE OF FRACTIONAL SHARES)
AT THE PRICE AT WHICH IT IS OFFERED TO OTHERS.

ARTICLE VI . INITIAL REGISTERED OFFICE & AGENT
THE STREET ADDRESS OF THE INITIAL REGISTERED OFFICE OF THE
CORPORATION IS: 1410 SW 87th AVENUE
PEMBROKE PINES, FL 33025
AND THE NAME OF THE INITIAL REGISTERED AGENT OF THIS CORPORATION AT
THAT ADDRESS IS: MICHAEL FARRINGTON

DRC PAIRO BY: L.C. FARRINGTOX, ISSA. 8362 Pines BLVO. # 421 Pembroke Pines, IT. 33024 BAR# 935573 954-433-9469

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ARTICLE VII - INITIAL BOARD OF DIRECTORS
THIS CORPORATION SHALL HAVE ONE DIRECTOR INITIALLY. THE NAME
AND ADDRESS IS: MICHAEL FARRINGION 1410 SW 87th AVENUE
PEMBROKE PINES, FL 33025

ARTICLE VIII - SPECIAL PROVISION

IT IS THE INTENT OF THE INCORPORATOR THAT THE CORPORATION WILL

QUALIFY UNDER SECTION 1244 OF THE INTERNAL REVENUE CODE AND THAT

THE CORPORATION CAN FILE AS A SUBCHAPTER S CORPORATION.

ARTICLE IX - INDEMNIFICATION

THIS CORPORATION SHALL INDEMNIFY ANY OFFICER OR DIRECTOR OR ANY FORMER OFFICER OR DIRECTOR. TO THE FULL EXTENT PERMITTED BY

THIS CORPORATION RESERVES THE RIGHT TO AMEND OR REPEAL ANY PROVISION CONTAINED IN THESE ARTICLES OF INCORPORATION, OF AMENDMENT HERETO, AND ANY RIGHT CONFERRED UPON THE SHAREHOLDERS IS

IN WITNESS THEREOF, THE UNDERSIGNED SUBSCRIBER HAS EXECUTED THESE ARTICLES OF INCORPORATION THIS 1/ DAY OF MAY , 1999.

MICHAEL FARRINGTON

STATE OF FLORIDA:

58

COUNTY OF BROWARD:

BEFORE ME, A NOTARY PUBLIC, DULY AUTHORIZED IN THE STATE AND COUNTY NAME ABOVE TO TAKE ACKNOWLEDGMENTS, PERSONALLY APPEARED AND PERSONALLY KNOWN TO ME, MICHAEL FARRINGTON IS THE SUBSCRIBER AND HAS EXECUTED THE FORGOING ARTICLES OF INCORP-ATION, AND HAS ACKNOWLEDGED BEFORE ME THAT HE EXECUTED AND SUBSCRIBED TO THESE ARTICLES OF INCORPORATION. WITHESS MY HAND AND OFFICIAL SEAL IN THE COUNTY AND STATE AFORESAID THOS 17 DAY, OF MAY 19 99

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Noury Police State of Florida
Commission No. CC 582354
My Commission Page 1970400000

MY COLLEGE STATE OF THE CA.

CERTIFICATE AND ACKNOWLEDGEMENT OF REGISTERED AGENT

CERTIFICATE OF REGISTERED AGENT OF

EXHIBITOR RESOURCES, INC.

PURSUANT TO FLORIDA STATUTES SECTIONS 46.091 AND 607.034, THE

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 1410 SW 87th AVENUE

HAS NAMED MICHAEL FARRINGTON . LOCATED AT THE AFORESAID ADDRESS. AS ITS REGISTERED AGENT TO ACCEPT SERVICE OF PROCESS WITHIN THIS STATE.

ACKNOWLEDGEMENT

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT TO ACT IN THIS CAPACITY. AND AGREE TO COMPLY WITH THE PROVISIONS OF PLORIDA LAW IN KEEPING OPEN SAID OFFICE.

REGISTERED AGENT

99 NAY 19 PN 1: 37
SEGRETARY OF STATE