

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

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SUBJECT: CINE	ERGY ANIMATIONS INC.				
		rate name - must include suff	ix)		
Enclosed is an origin	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 PY REQUIRED		
FROM: FREDDY E. HERNANDEZ  Name (Printed or typed)					
	MIAMI, FLORIDA 33182	ddress State & Zip		99 MAY 17 P SECRETARY O TALLAHASSEE	FLE

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

Daytime Telephone number

## 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.

NAME\_ ARTICLE I

The name of the corporation shall be:

CINERGY ANIMATIONS INC.

ARTICLE II PRINCIPAL OFFICE

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

301 N.W. 120 AVENUE MIAMI, FLORIDA 33182

SHARES ARTICLE III

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

100 AT NO PAR VALUE

INITIAL REGISTERED AGENT AND STREET ADDRESS

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

FREDDY E. HERNANDEZ

301 N.W. 120 AVENUE

MIAMI, FLORIDA 33182

INCORPORATOR ARTICLE V

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

FREDDY E. HERNANDEZ

301 N.W. 120 AVENUE

MIAMI, FLORIDA 33182

Signature/Incorporator Agent

(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

	 <del></del>	Doto
Signature/Registered Agent		Date