# P99000057140

#### Florida Department of State

Division of Corporations Public Access System Katherine Harris, Secretary of State

#### **Electronic Filing Cover Sheet**

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H99000015319 9)))

**Note:** DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850) 922-4001

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number : 072450003255 Phone : (305)541-3694 Fax Number : (305)541-3770 99 JUN 23 MM 9: 30
SECRETARY OF STATE
ALLAHASSEE, FLOREDA

#### FLORIDA PROFIT CORPORATION OR P.A.

NATURAL LIGHT COMMUNICATIONS, INC.

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

N. CULLIGAN JUN 2 4 1999

6/23/99 3:39 PM

# H99000015319

#### ARTICLES OF INCORPORATION

OF

NATURAL LIGHT COMMUNICATIONS, INC.

The undersigned Incorporation(s), for the purpose of forming a corporation under the Florida General Corporation Act, hereby adopt(s) the following Articles of Incorporation.

#### ARTICLE I NAME

The name of the corporation shall be:

NATURAL LIGHT COMMUNICATIONS, INC. 2150 Coral Way, Suite 5C Miami, Florida 33145

The principal place of business of this corporation shall be:

2150 Coral Way, Suite 5C Miami, Florida 33145

#### ARTICLE II NATURE OF BUSINESS "

This corporation may engage in media production service investments or transact any or all lawful activities or business permitted under the laws of the United State, the State of Florida, or any other state, country, territory or nation.

#### ARTICLE III CAPITAL STOCK

The aggregate number of shares of stock and its par value that this corporation is authorized to have outstanding at any one time is:

500 AT \$1.00 PAR VALUE

#### ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

This instrument prepared by:

Melie Viera, Attorney at Law 2525 sw 3<sup>rd</sup> Avenue, Suite 304 Miami, Florida 33129 FB#0794945

H99000015319

9 JUN 23 AM 9: 31

### H99000015319

#### ARTICLE V OFFICERS DIRECTORS

The name(s) and street address(es) of the initial officer(s) and director(s), if any, who shall hold office the first year of the corporation's existence or until their successor(s) is (are) elected, is (are):

NAME: Chad Dominicis

TITLE: President/ Secretary/Treasure

ADDRESS: 2150 Coral Way Suite 5C

Miami, Florida 33145

#### ARTICLE VI INCORPORATOR (S)

The name(s) and street address(es) of the Incorporator(s) to these articles of incorporation is(are):

NAME: Chad Dominicis

TITLE: President/Secretary/Treasure

ADDRESS: 2150 Coral Way Suite 5C

Miami, Florida 33145

#### ARTICLE VII REGISTERED AGENT

The name and street address of the Registered Agent to these articles of incorporation is:

Chad Dominicis 2150 Coral Way Suite 5C Miami, Florida 33145

IN WITNESS WHEREOF, the undersigned incorporator(s) has executed these Articles of Incorporation this 22 day of June, 1995.

Signature(s) of Incorporator(s)

esident

•

H99000015319

## H99000015319

STATE OF FLORIDA COUNTY OF DADE
THE FOREGOING instrument was acknowledged and sworn to before me
this 22 day of Jule, 1999, by Maje Visto October 30, 2001  BONDED THAN THOY FAM RESURANCE, INC.
Notary Public My Commission Expires: (SEAL)
CERTIFICATE DESIGNATING
REGISTERED AGENT/REGISTERED OFFICE
Pursuant to the provisions of Section 607.325, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.
1. The name of the corporation is: Natural Light
Communications, Inc.
2. The name and address of the registered agent and office is: 2
Chad Dominicis 2150 Coral Way Suite 5C Miami, Florida 33145  SIGNATURE Chad Dominicis
TITLE President
DATE 22 June, 1999
HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325 FLORIDA STATUES.