TRANSMITTAL LETTER

Department of State Division of Corporations

Tallahassee, FL 32314

P. O. Box 6327

Insite Media Designs, Inc. SUBJECT: (Proposed corporate name - must include suffix) 55 Enclosed is an original and one(1) copy of the articles of incorporation and a check for: \$70.00 **3** \$78.75 **\$78.75** \$87.50 Filing Fee Filing Fee Filing Fee Filing Fee, Certified Copy & Certificate of Status & Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED Jennifer D'Angelo Name (Printed or typed) 1391 Seagrape Weston, FL 33326 City, State & Zip

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

Daytime Telephone number

954.389.1837

-07/16/99--01053--009

*****87.50 *****87.50

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:

Insite Media Designs, Inc.

ARTICLE II PRINCIPAL OFFICE

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

13326 SW 28 Street

Ft. Lauderdale, FL 33330

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 100,000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Anthony M. Gonzalez 13326 SW 28 Street

Ft. Lauderdale, FL 33330

ARTICLE V INCORPORATOR

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

Jennifer D'Angelo 1391 Seagrape Circle Weston, FL 33326

Signature/Incorporator

7-14-99

Date

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(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 the positional registered agent

Signature/Registered Agent

Date