## 79000065568

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

SUBJECT: Media Options Inc.  (Proposed corporate name - must include suffix)						
₩.		90	00002940429 -07/23/9901068022 *****78.75 *****78.75			
Enclosed is an original and one(1) copy of the articles of incorporation and a check for:						
□ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy  ADDITIONAL COP	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED			
FROM:	Maureen L. Name (Pri  2978 GIV  Ac  Tullahasse  City, S		SP JUL 23 PH 2: 43 SECRETARY OF STATE TRILLAHASSEE, FLORIDA			
	Daytime Tel	ephone number				

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

## ARTICLES OF INCORPORATION

Signature/Registered Agent

The undersigned incorporator, for the purpose of forming a corporation under the Flori	da
Business Corporation Act, hereby adopts the following Articles of Incorporation.	

ARTICLE I NAME  The name of the corporation shall be:	Ž.	g 2
Media Options	HASS.	
ARTICLE II PRINCIPAL OFFICE The principal place of business and mailing address of a 978 Giverny Circle Tallahasses, F	of this corporation shall be:	P
ARTICLE III SHARES  The number of shares of stock that this corporation is	s authorized to have outstanding at any one ti	me is:
<b>Ø</b> 1		
The name and Florida street address of the initial region of the i	OMPSON CIRCLE CIRCLE Articles of Incorporation are:	
(An additional article must be	added if an effective date is requested.)	
Having been named as registered agent and to accept service a certificate, I hereby accept the appointment as registered agen provisions of all statutes relating to the proper and complet obligations of my position as registered agent	nt and agree to act in this capacity. I further agree te performance of my duties, and I am familiar w	to comply with the
(Mb) hommon	7/3/99	

Date