199008/230 TRANSMITTAL LETTER 8/230

FILED

99 SEP -7 AMII: 10

JEUNLIARY OF STATE TALLAHASSEE, FLORIDA

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

SUBJECT: _		New Latin Cult	fure Entertain ate name - must include suffix	ment, Inc.	–
Enclosed is an o	origina	al and one(1) copy of the article	es of incorporation and a c	eneck for:	
S70. Filing F		\$78.75 Filing Fee & Certificate of Status	□\$78.75 Filing Fee & Certified Copy ADDITIONAL COI	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	
F	ROM	William A. Name (F	Hurtado Printed or typed)		
		3252 N.	Pine Island Address	<u></u>	
		Sunrise,	FL 33351 , State & Zip	8000023 -09/07/9 *****78.	901115017 .75 *****78.75
			7->8/7 Telephone number	-	

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

34/14/58

ARTICLES OF INCORPORATION

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99 SEP -7 AMII: 10

The undersigned incorporator, for the purpose of forming a corporation under the TOTALL Florida Business Corporation Act, hereby adopts the following Articles of Incorporation RIDA

ARTICLE I NAME

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The name of the corporation shall be: New Latin Culture Entertainment, Inc.

ARTICLE II PRINCIPAL OFFICE

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

PMB# 81, 7154 N. University Dr. Tamarac, FL 33321

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: Five Thousand (5,000) Shares

(Registered Agent)

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

William A. Hurtado 3252 N. Pine Island, Sunrise, FL 33351

ARTICLE V INCORPORATOR

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

William A. Hurtado 3252 N. Pine Island Sunrise, FL 33351

ure/Incorporator

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.

re/Registered Agent

Date