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LAZARUS CORPORATE FILING SERVICE, INC.

(Requestor's Name)

3320 S.W. 87th AVENUE

(Address)

MIAMI, FLORIDA (305)552-5973

(City, State, Zip)

(Phone #)

LOCAL REPRESENTATIVE TALLAHASSEE

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known): 7000002989007--9

-09/16/99--01053--014

*****78.75 *****78.75

1. VIDEOART, INC.

(Corporation Name)

(Document #)

2. (Corporation Name)

(Document #)

3. (Corporation Name)

(Document #)

4. (Corporation Name)

(Document #)

☒ Walk in

☒ Pick up time 2:00

☒ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

99 SEP 16 PM 12:08

RECEIVED

DEPARTMENT OF STATE
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

99 SEP 17 PM 1:27

FILED

NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Examiner's Initials

OB
9-17-99



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

September 16, 1999

LAZARUS CORPORATE FILING SERVICE, INC.

MIAMI, FL

SUBJECT: VIDEOART, INC.
Ref. Number: W99000021374

We have received your document for VIDEOART, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as Registered Agent.")

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6924.

Kimberly Rolfe
Corporate Specialist Supervisor

Letter Number: 799A00045679

ARTICLES OF INCORPORATION

OF

VideoArt, INC.

FILED
99 SEP 17 PM 1:27
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I - NAME

The name of this corporation is: VideoArt, INC. ARTICLE II

- DURATION

This corporation shall have perpetual existence, unless
sooner dissolved in accordance with the laws of the State of
Florida.

ARTICLE III - ADDRESS

The mailing address of the corporation is 901 Ponce de
Leon Blvd, Suite 200, Coral Gables, Florida 33134

ARTICLE IV - PURPOSE

This corporation is organized for the purpose of
transacting any and all business permitted under the laws of the
United States and of the State of Florida.

ARTICLE V - CAPITAL STOCK

This corporation is authorized to issue One Hundred (100)
shares of NO par value common stock, which shall be designated
"Common Stock".

ARTICLE VI- PREEMPTIVE RIGHTS

Every shareholder, upon the sale for cash of any new stock of this corporation of the same kind, class or series as that which he already holds, shall have the right to purchase his pro rata share thereof (as nearly as may be done without issuance of fractional shares) at the price at which it is offered to others.

ARTICLE VII - PRINCIPAL OFFICE AND REGISTERED AGENT

The street address of the principal office of this corporation is 901 Ponce de Leon Blvd, Suite 200, Coral Gables, Florida 33134

and the name of the initial registered agent of this corporation is Pedro Roig.

ARTICLE VIII - INITIAL BOARD OF DIRECTORS

This corporation shall have One (1) director initially.

The number of directors may be increased from time to time as provided in the bylaws but shall never be less than ONE.

The name and address of the initial director of this corporation is:

Pedro Roig

901 Ponce de Leon Blvd,
Suite 200, Coral Gables,
Florida 33134

ARTICLE IX - INDEMNIFICATION

The corporation shall indemnify any officer or director, or any former officer or director, to the full extent permitted by law.

ARTICLE X - INCORPORATOR

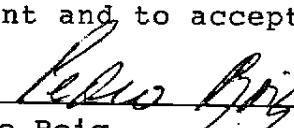
The name and address of the person signing these articles is:

Pedro Roig

901 Ponce de Leon Blvd,
Suite 200, Coral Gables,
Florida 33134

IN WITNESS WHEREOF, the undersigned subscriber have executed these articles of incorporation this _____ day of September 1999.

Having been name as a registered agent and to accept the service.


Pedro Roig
Incorporator/Registered Agent

STATE OF FLORIDA)

: ss

COUNTY OF MIAMI-DADE)

Before me, a notary public authorized to take acknowledgments in the state and county set forth above, personally appeared Pedro Roig, known to me and known by me to be the person who executed the foregoing articles of incorporation, who has produced Florida Drivers License as identification and acknowledged before me that she executed those articles of incorporation.

99 SEP 17 PM 1:28
FILED
SECRETARY OF STATE
FLORIDA

