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

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

SUBJECT: TALK TV OF TAMPA, INC.
I enclose an original and 1 copy(ies) of the Articles of
Incorporation for the above corporation and a check in the
amount of \$ 78.75 CL# 1533

SIGNED: [Signature]

From:

Name

Mike MASSIMI

Address

3615 SWAN AVE

City

TAMPA FL 33609

State

Zip

813 254 9705

Telephone Number

FILED
99 NOV 17 AM 9:36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

S. Thompson NOV 19 1999

**ARTICLES OF INCORPORATION
OF
Talk TV of Tampa, Inc.**

ARTICLE I NAME

The name of the corporation shall be: Talk TV of Tampa, Inc.

ARTICLE II PRINCIPAL OFFICE

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

PRINCIPAL PLACE OF BUSINESSES: 5002 West Dickens Ave.
Tampa, FL 33629

MAILING ADDRESS: PO Box 320625
Tampa, FL 33679-2625

ARTICLE III CAPITAL STOCK

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

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:


MICHAEL P Massimini CPA
3615 Swann Ave Tampa, FL 33609

ARTICLE V INCORPORATOR

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

Michael Massimini CPA
3615 Swann Ave Tampa, FL 33609

The undersigned has executed these Articles of Incorporation this 13 day of NOV. 1999.


Mike Massimini CPA
, Incorporator

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TALLAHASSEE FLORIDA

REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607.0501, 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:

TAUK TV OF TAUPA, INC.

2. The name and address of the registered agent and office is:

MICHAEL MASSIMINI

3615 SWAN AVE

TAUPA R 33609

Signature: [Signature]

Title: CRA

Date: 11/13/99

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.

Signature: [Signature]

Date: 11/13/99

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TALLAHASSEE FLORIDA