Florida Department of State

Division of Corporations Public Access System Katherine Harris, Secretary of State

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To:

Division of Corporations

Fax Number : (850)922-4001

From:

Account Name : FAS-T CORP. AGENTS, INC.

Account Number : 071001002335 Phone

: (305)599-0839

Fax Number

: (305)716-0346

FLORIDA PROFIT CORPORATION OR P.A.

SHOCK LIMIT VIDEO, INC.

Certificate of Status	0
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ARTICLES OF INCORPORATION OF

SHOCK LIMIT VIDEO, INC.

ARTICLE I. NAME

The name of this corporation is:

SHOCK LIMIT VIDEO, 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. 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 IV. CAPITAL STOCK

This corporation is authorized to issue FIVE HUNDRED (500) shares of COMMON STOCK, with a par value of TEN (\$10.00) dollars each.

AMOUNT OF CAPITAL ARTICLE V.

The amount of capital with which this corporation will begin business is not less than FIVE THOUSAND (\$5,000.00) DOLLARS.

ARTICLE VI. PREEMPTIVE RIGHTS

Every shareholders 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.

Prepared By: ALEXIS PIEDRA 3920 S.W. 87th Avenue 33174 Miami, Fl 305-227-3582

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ARTICLE VII. INITIAL REGISTERED OFFICE, AGENT AND PRINCIPAL OFFICE

The street address of the initial registered office of this corporation is:

3920 S.W. 87th Place, Miami, Fl

The name of the initial registered agent of this corporation is:

ALEXIS PIEDRA

The corporation principal office shall be:

3920 S.W. 87th Place, Miami, Fl ARTICLE VIII. INITIAL BOARD OF DIRECTORS 33174

This corporation shall have (ONE) director(s), initially. The number of director(s) may be either increased of diminished from time to time by the bylaws but shall never be less than ONE (1).

The name(s) and address (es) of the initial Board of Director(s) of this corporation is (are):

> ALEXIS PIEDRA 3920 S.W. 87th Place 33174 Miami, Fl

ARTICLE IX. INDEMNIFICATION

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

INCORPORATORS ARTICLE X.

The name and address of the person(s) signing these Articles of Incorporation is (are):

> ALEXIS PIEDRA 3920 S.W. 87th Place Miami, Pl 33174

IN WITNESS THEREOF, we, being all of the original subscribers and incorporators of this Corporation for the purpose of forming a Corporation, do make and file these Articles of Incorporation with the Secretary of State of the State of Florida, and accordingly set our hands and seal this 15th day of December, 1999.

ALEXIS PIEDRA

STATE OF FLORIDA COUNTY OF MIAMI-DADE

I HEREBY CERTIFY THAT on this day, before me a Notary Public duly authorized in the above mentioned State and County to take acknowledgments, personally appeared ____ALEKIS PIEDRA_____

to me well known and known to be the persons described in and who executed these foregoing Articles of Incorporation, and they acknowledged before me that they subscribed to those Articles of Incorporation.

WITNESS my hands and official seal in the City of Miami, County of Miami-Dade and State of Florida, this 16th day of December 1999.

> NOTARY PUBLIC STATE OF PLOREDA AT LARGE

CERTIFICATE DESIGNATING DOMICILE FOR THE SERVICE OF PROCESS WITHIN THE STATE OF FLORIDA NAMING AGENT WHO PROCESS MAY BE SERVED

In pursuance of Chapte	r 48,091, Florida Statutes, the foll	owing is submitted, in		
compliance with said A		_		
First-That	SHOCK LIMIT VIDEO, IN- under the laws of the State of Fl	orida with its principal off	ice at	
			100 &	
<u></u>	W 87th Place . County of Miami Dade	State of Florida has		
the City of Miami	,County of Mismi-Dade	_ ,State of Profidation		
annaintea	XYDYTC DTCDDX			
City of <u>Miami</u>	County ofDade	State of Florida. as	; its	
agent to accept service	of process within this State.			
		•		
	ACKNOWLEDGMENT	· :		
Having been na	med to accept service of process this Certificate, I hereby accept to	or the above stated Corporact in this canacity, and ag	ration, ree to	
comply with the provis	ions of said Act, relative to keeping	ng open said office.		
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ALEXIS	S PIEDRA			
Sworn to and subscribe				
this 16th day of	December , A.D. 199.9.		1 _	
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