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COVER LETTER

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

SUBJECT: S61 Company Dancers, Inc.
(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

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

\$78.75
Filing Fee
& Certified Copy

\$87.50
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM: CAROL L. RODRIGUEZ
Name (Printed or typed)

12330 S.W. 53rd ST. Suite 705
Address

Cooper City, FL 33330
City, State & Zip

954-689-4097
12330 S.W. 53rd ST. Suite 705
Cooper City, FL 33330

Info@studio-61.com
E-mail address: (to be used for future annual report notification)

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

ARTICLES OF INCORPORATION
In compliance with Chapter 617, F.S., (Not for Profit)

ARTICLE I NAME S61 Company Dancers, Inc.
The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE
Principal street address
12330 SW 53rd ST. Suite 705
Cooper City, FL 33330

Mailing address, if different is:

ARTICLE III PURPOSE
The purpose for which the corporation is organized is:

S61 Company Dancers, Inc. is organized exclusively for charitable and educational purposes, including, for such purposes, the making of distributions to organizations that qualify as exempt organizations under section 501(c)(3) of the Internal Revenue Code, or the corresponding section of any future federal tax code.

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed:
The directors have been elected by the participants of the corporation named within these articles of incorporation.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Carol L. Rodriguez (President) Name and Title: _____
Address: 12511 NW 10th ST. Address: _____
Sunrise, FL, 33323

Name and Title: Gracy Francis (Vice President) Name and Title: _____
Address: 13178 NW 19th ST. Address: _____
Pembroke Pines, FL 33328

Name and Title: _____ Name and Title: _____
Address: _____ Address: _____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Nina Francis
Address: 13178 NW 19th ST.
Pembroke Pines, FL 33328

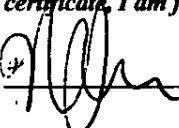
DEPARTMENT OF STATE
11 APR - 1 PM 3:05

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Eugene T. Boyle
Address: 11182 SW 17th Manor
Davie, FL, 33324

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Required Signature of Registered Agent

11/1/11
Date

I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.



Required Signature of Incorporator

1/1/11
Date