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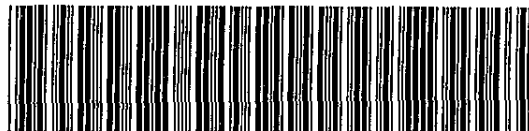
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2004 MAR 25 A 9:02

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

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

SUBJECT: P2 Entertainment Productions, Inc.

Enclosed is an original and one (1) copy of the Certificate of Domestication and a check for:

FEES:

Certificate of Domestication	\$50.00
Articles of Incorporation and Certified Copy	<u>\$78.75</u>
Total to domesticate and file	\$128.75

OPTIONAL:

Certificate of Status	\$ 8.75
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FROM: Christine R. Huffman of P2 Entertainment Productions, Inc.

Name (printed or typed)

511 Magnolia Street

Address

Windermere, FL 34786

City, State & Zip

321-217-9096 or 407-876-3799

Daytime Telephone number

TALLAHASSEE

CERTIFICATE OF DOMESTICATION

The undersigned, Christine R. Huffman, President
(Name) (Title)

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of P2 Entertainment Productions, Inc. a foreign corporation
(Corporation Name)

2004 MAR 25 A 9:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

in accordance with s. 607.1801, Florida Statutes, does hereby certify:

1. The date on which corporation was first formed was January 27, 1999
2. The jurisdiction where the above named corporation was first formed, incorporated, or otherwise came into being was the State of Utah, United States of America
3. The name of the corporation immediately prior to the filing of this Certificate of Domestication was P2 Entertainment Productions, Inc.
4. The name of the corporation, as set forth in its articles of incorporation, to be filed pursuant to s. 607.0202 and 607.0401 with this certificate is P2 Entertainment Productions, Inc.
5. The jurisdiction that constituted the seat, siege social, or principal place of business or central administration of the corporation, or any other equivalent jurisdiction under applicable law, immediately before the filing of the Certificate of Domestication was the State of Utah. The address of the corporation was 211 North Main Street, Farmington, UT 84025.
6. Attached are Florida articles of incorporation to complete the domestication requirements pursuant to s. 607.1801.

I am Christine R. Huffman, of P2 Entertainment Productions, Inc.

and am authorized to sign this Certificate of Domestication on behalf of the corporation and have done so this the 19 day of March, 2004


(Authorized Signature)

Filing Fee:

Certificate of Domestication	\$50.00
Articles of Incorporation and Certified Copy	\$78.75
Total to domesticate and file	\$128.75

ARTICLES OF INCORPORATION
IN COMPLIANCE WITH CHAPTER 607, F.S.

ARTICLE I NAME

THE NAME OF THE CORPORATION SHALL BE:

P2 Entertainment Productions, Inc.

ARTICLE II PRINCIPAL OFFICE

THE PRINCIPAL PLACE OF BUSINESS/ MAILING ADDRESS IS:

511 Magnolia Street, Windermere, FL 34786

ARTICLE III PURPOSE

THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZED:

To produce creative projects such as theatrical shows, theme park shows, corporate events and original written works.

ARTICLE IV SHARES

THE NUMBER OF SHARES OF STOCK IS:

Fifty Thousand Shares (50,000) of which two thousand shares (2,000) have been dispersed.

ARTICLE V INITIAL DIRECTORS AND/ OR OFFICERS

THE NAME(S) AND ADDRESS(ES) AND SPECIFIC TITLES:

Christine R. Huffman, 511 Magnolia Street, Windermere, FL 34786, President

Mark P. Huffman, 511 Magnolia Street, Windermere, FL 34786, Vice President

Christine R. Huffman, 511 Magnolia Street, Windermere, FL 34786, Treasurer

Christine R. Huffman, 511 Magnolia Street, Windermere, FL 34786, Secretary

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

THE NAME AND FLORIDA STREET ADDRESS OF THE REGISTERED AGENT IS:

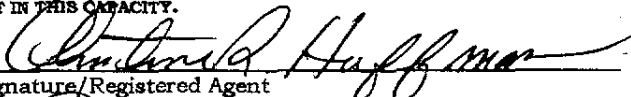
Christine R. Huffman, 511 Magnolia Street, Windermere, FL 34786

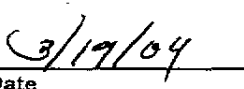
ARTICLE VII INCORPORATOR

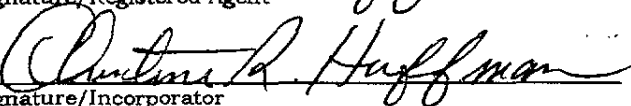
THE NAME AND ADDRESS OF THE INCORPORATOR IS:

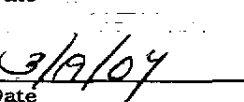
Christine R. Huffman, 511 Magnolia Street, Windermere, FL 34786

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 AM FAMILIAR WITH AND ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY.


Signature/Registered Agent


Date


Signature/Incorporator


Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA