

1.) CORPORATION NAME: ARTSMARKETING SERVICES INC.	DUE DATE: 2/29/2012				
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: CORPORATION SERVICE COMPANY BANK OF AMERICA CENTER 16TH FLOOR, 1111 EAST MAIN STREET RICHMOND, VA 23219	SCC ID NO: F1206053				
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: RICHMOND CITY	5.) STOCK INFORMATION <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%;">CLASS</td> <td style="width:50%;">AUTHORIZED</td> </tr> <tr> <td>COMMON</td> <td>1,000</td> </tr> </table>	CLASS	AUTHORIZED	COMMON	1,000
CLASS	AUTHORIZED				
COMMON	1,000				
4.) STATE OR COUNTRY OF INCORPORATION: DE					

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 260 KING ST., E, STE. 500

CITY/ST/ZIP: TORONTO, ONT M5A 1K3, FN 99999CA

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: ROB BROWN TITLE: CHRMN ADDRESS: 260 KING ST. E, STE. 500 CITY/ST/ZIP/CO: Toronto, M5A4L5, CA		

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: Ava Paulin TITLE: CEO/ CFO ADDRESS: 260 KING ST E STE 500 CITY/ST/ZIP/CO: Toronto, M5A4L5, CA		

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: Kim Lampe TITLE: VICE PRESIDENT ADDRESS: 8260 Rachel Lane CITY/ST/ZIP/CO: Ridgeville, OH 44039		

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

/s/ Ava Paulin	Ava Paulin, CEO/ CFO	4/24/2012
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.