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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

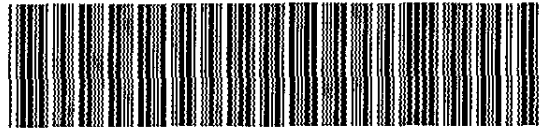
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

03 JUL 15 PM 5:46

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7-17

TRANSMITTAL LETTER

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

SUBJECT: @MDG.sol CORPORATION
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

<input type="checkbox"/> \$70.00 Filing Fee	<input checked="" type="checkbox"/> \$78.75 Filing Fee & Certificate of Status	<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED			

FROM: MICHAEL D. GARDN
Name (Printed or typed)

18941 AVE. BIARRITZ
Address

LUTZ, FL 33558
City, State & Zip

(813) 909-4444
Daytime Telephone number

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

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

@MDG.sol Corporation

ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is:

18941 AVENUE BIARRITZ, LUTZ, FL 33558

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

MANUFACTURING CONSULTING SERVICES

ARTICLE IV SHARES

The number of shares of stock is:

500 SHARES

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

MICHAEL D. GARDN - PRESIDENT
18941 AVENUE BIARRITZ
LUTZ, FL 33558

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

MICHAEL D. GARDN, 18941 AVENUE BIARRITZ, LUTZ, FL 33558

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

MICHAEL D. GARDN, 18941 AVENUE BIARRITZ, LUTZ, FL 33558

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

Michael D. Gardn

Signature/Registered Agent

7/14/03

Date

Michael D. Gardn

Signature/Incorporator

7/14/03

Date