TRANSMITTAL LETTER OR OO OO OO S

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

SUBJECT: MTPFLDDRING Inc. (Proposed corporate name - must include suffix)						
Enclosed is an origin	al and one(1) copy of the articles		10000260 -08/05/98 *****78, check for :	301049		
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	□\$122.50 Filing Fee & Certified Copy	\$131.25 Filing Fee, Certified Copy & Certificate	,		
		ADDITIONAL CO	PY REQUIRED			
FROM:	7504 N. Ho	rinted or typed) Ward Ave	SECRETARY OF TALLAHASSEE, I	98 AUG -5 AN		
	Tampa F	<u> </u>) Floring	Q 7: 15 €		
813-930-2350 Daytime Telephone number						
		· .	8-1198			

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

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Floria
Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE	T	NA	ME
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The name of the corporation shall be:

MTP FLOORING, Inc.

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ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

7504 N. Howard Ave Tampa FL 33604

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Manuel T. Perez

Manuel T. Perez 7504 N. Howard Ave Tampa FL 33604

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

Manuel T. Perez 7504 N. Howard Ave Tampa FL 33604

Signature/Incorporator

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(An additional article must be added if an effective date is requested.)

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 hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent

Signature/Registered Agent

Date