P.0140001967

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

FFECTIVE DATE

700003086037--6 -01/03/00--01101--015 ****131.25 ******87.50

SUBJECT:	ulian	Mathis			Inc.
	(Proposed corporate name - must include suffix)				
)				

Enclosed is an original ar	nd one(1) copy of the artic	cles of incorporation and a	check for :
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	\$122.50 Filing Fee & Certified Copy	\$131.25 Filing Fee, Certified Copy & Certificate

is INTERIOR DESIGN, INC

Name (Printed or typed)

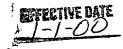
Tollahassee, FL 32303

City, State & Zip

Daytime Telephone number

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

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ARTICLES OF INCORPORATION

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

The state of the s
ARTICLE I NAME
The name of the corporation shall be:
Julian Wathis INTERIOR DOSEX, INC.
ARTICLE II PRINCIPAL OFFICE
The principal place of business and mailing address of this corporation shall be:
704 & Sixth Avenue
Tailahassee, PL 32303
ARTICLE III SHARES
The number of shares of stock that this corporation is authorized to have outstanding at any one time is:
10,000
ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and Florida street address of the initial registered agent are
C.D. CONNELL
1138 E Tennessee St
Tallahassee, FL 32308
ARTICLE V INCORPORATOR
The name and address of the incorporator to these Articles of Incorporation are:
Julian Mathis
JOH & Sixth Ave
Tallahassee, FL 32303
$\int_{-\infty}^{\infty} \int_{-\infty}^{\infty} \int_{-\infty}^{\infty$
Julian Methis 12/20/99
Signature/Incorporator Date
ArticleVI

We herein elect an effective date of January 1, 2000 for the beginning date of the corporation.

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