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ACCOUNT NO. : 072100000032

REFERENCE : 566571 162199A

AUTHORIZATION :

COST LIMIT : \$ PPD

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
00 JAN 27 PM 2:35

ORDER DATE : January 27, 2000

ORDER TIME : 11:40 AM

ORDER NO. : 566571-005

CUSTOMER NO: 162199A

CUSTOMER: Rick M. Morse, Cpa
RICK M. MORSE, CPA, P.A.
RICK M. MORSE, CPA, P.A.
Suite 300
1700 University Drive
Coral Springs, FL 33071

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-01/27/00--01067--011
*****78.75 *****78.75

DOMESTIC FILING

NAME: L. SLATER, INC.

EFFECTIVE DATE:

XX ARTICLES OF INCORPORATION
 CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
 PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Christine Lillich

EXAMINER'S INITIALS:

RECEIVED
00 JAN 27 PM 12:52
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

1/27/00

ARTICLES OF INCORPORATION
OF

L. SLATER, INC.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
00 JAN 27 PM 2:35

ARTICLE I

NAME

The name of this Corporation shall be :

L. SLATER, INC.

ARTICLE II

PURPOSE

This corporation is organized for the purpose of WHOLESALE/
INSTALLATION and transacting any and all lawful business.

ARTICLE III

CAPITAL STOCK

This corporation is authorized to issue 1000 shares of \$ 1
par value common stock.

ARTICLE IV

INITIAL PRINCIPAL OFFICE AND REGISTERED AGENT

The street address of the initial principal office of this
corporation is:

7420 N. DEVON DRIVE, APT #203
TAMARAC, FLORIDA 33321

and the name of the initial registered agent of this
corporation at the above address is:

LEWIS SLATER

ARTICLE V

DIRECTORS

This corporation shall have one Director initially. The number of Directors may be either increased or diminished from time to time by the By-Laws but shall never be less than one. The name and address of the initial Director of this corporation is:

LEWIS SLATER
7420 N. DEVON DRIVE, APT #203
TAMARAC, FLORIDA 33321

ARTICLE VI

INCORPORATOR

The name and address of the person signing these Articles is:

LEWIS SLATER
7420 N. DEVON DRIVE, APT #203
TAMARAC, FLORIDA 33321

ARTICLE VII

POWERS

This corporation shall have all of the corporate powers enumerated in the Florida General Corporation Act.

ARTICLE VIII

INDEMNIFICATION

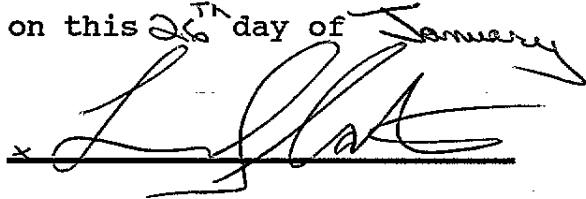
The corporation shall indemnify any officer or director or former officer or former director to the full extent permitted by law.

ARTICLE IX

AMENDMENT

This corporation reserves the right to amend or repeal any provisions contained in these Articles of Incorporation, or any Amendment to them, and any right conferred upon the shareholders is subject to this reservation.

IN WITNESS WHEREOF, the undersigned subscriber has executed these Articles of Incorporation on this 26th day of January 2000

A handwritten signature, likely of Lewis Slater, written over a horizontal line.

STATE OF FLORIDA
COUNTY OF BROWARD

I HEREBY CERTIFY that on this 26th DAY of January, 2000 LEWIS SLATER appeared before me the undersigned authority, to me well known and known to me to be the individual described in and who executed the foregoing Articles of Incorporation, and acknowledged before me that he executed the same, freely and voluntarily for the purpose therein expressed.

A handwritten signature, likely of Rick M. Morse, written over a horizontal line.
Notary Public

ss: My Commission Expires:



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 JAN 27 PM 2:35

CERTIFICATE DESIGNATION PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN FLORIDA. NAMING AGENT UPON WHICH PROCESS MAY BE SERVED.

IN COMPLIANCE WITH SECTION 48.091, FLORIDA STATUTES.
THE FOLLOWING IS SUBMITTED;

L. SLATER, INC.

DESIRING TO ORGANIZE OR QUALIFY UNDER THE LAWS OF THE STATE OF FLORIDA.

WITH ITS PRINCIPAL PLACE OF BUSINESS AT CITY OF TAMARAC, FLORIDA HAS NAMED LEWIS SLATER LOCATED AT 7420 N. DEVON DR. APT#203, TAMARAC, FLORIDA 33321 IS ITS AGENT TO ACCEPT SERVICE OF PROCESS WITHIN FLORIDA.

SIGNATURE 
CORPORATE OFFICER

TITLE x PRESIDENT

DATE x 1/26/00

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES.

SIGNATURE 

DATE x 1/26/00