2/2/2000 DATE

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

900003124079--0 -02/04/00--01052--014_ ****122.50 *****78.75

Re: J. A. F. (Name of C	OORS , Inc. SECRETARY OF
Gentlemen:	TARY C
Enclosed please find the original and one copy of the check in the amount of \$122.50.	
This represents the cost of the Filing Fees, Certified C Registered Agent Designation for the above named co	
Very trul	y yours.
-	Jorge Oco Andividual's Name)
	J. A. Floors, INC. (Name of Corporation)
2	MAILING ADDRESS OF CORPORATION —

- PHONE -

(305)362-5523

ARTICLES OF INCORPORATION

J. A. Floors, INC		
(name of c	orporation)	
The undersigned acting as the incorporators of a corporation the following articles of incorporation for such corporation:		rporation Act, adopt(s)
ARTICLE I - CO	RPORATE NAME	
The name of the corporation is: J.A. Floors, Inc.		15 80 FT
	- DURATION	ALESSES OF THE PROPERTY OF THE
This corporation shall exist perpetually unless dissolved a	ecording to Florida law.	11. 52
ARTICLE II.	I - PURPOSE	
The corporation is organized for the purpose of engaging i United States and the State of Florida.	n any activities or business permi	itted under the laws of the
ARTICLE IV - C The corporation is authorized to issueshares	CAPITAL STOCK of common stock, par value \$	per share.
ARTICLE V - INITIAL The street address of the initial principal office and, if diff	L PRINCIPAL OFFICE erent, the mailing address is:	
STREET ADDRESS 2547 W 65 STREET		
CITY Higlesh	FLORIDA FL.	ZIP 330/6
Mailing address, if different STREET ADDRESS		
ORGET REPORTS		
CITY	FLORIDA	ZIP
ARTICLE VI - INITIAL REGIS		
The street address of the initial registered office and	the name of the initial register	ed agent at the office is:
NAME MARID LEONARdo		
ADDRESS 21225 N. E 9 ct #	<u> </u>	
CITY Minni	FLORIDA	ZIP 33179

DORGE Aco DORESS 2547 W. 65 STree TY Higherh	T	
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<u> </u>	STATE FL.	ZIP 3317*9
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ГҮ	STATE	ZIP
undersigned incorporator(s) have executed th	ese Articles of Incorporation this _	Znd &
of February		
	Jorge Dec	
	10 0 1 1 1 1 1 1 1 1	(Signature)

(Signature)

CERTIFICATE OF DESIGNATION REGISTERED AGENT/ REGISTERED OFFICE

ΤΔ	Floors TNC.	ALANAS	A PARTIES
<u> </u>	1		226
	(name of corporation)	. 	

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted: The above corporation, organized under the laws of the State of Florida with its registered office as indicated in the Articles of Incorporation

	-				
at	1025 N.E. 9-C7	/-	=* <u>- `</u>		
	2547 W. 65 S	TRUT	Hinleach	FL. 33016	
has nam	ed MARIU Leon	nard	0		
located	at the aforesaid address, as its	registered	agent to accept se	rvice of process with	in this
state.	21225 N.E 9	ct	#3		
		27179	•		

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) 2/2/2000 (Date)