POOOOOSH759

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

SUBJECT: NEW Augustine Tool Toe. (Proposed corporate name 1 must include suffix)							
Enclosed is an original and one(1) copy of the articles		00032707 -05/30/0003 ******87.50	7360 1121006 ******87.50				
S70.00 S78.75 Filing Fee Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy ADDITIONAL COP	Filing Fee, Certified Copy & Certificate of Status					
3203 N. Ponce	de Lean Bl	vd.	FILED 2000 MAY 30 PM 12: 32 SECRETARY OF STATE ALLAHASSEE, FLORIDA				
904-819-0711	FL. 32095 State & Zip						

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

Of 6/7

ARTICLES	OF	INCOR	POF	RA	TI	O	N
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FILED

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

2000 MAY 30 PM 12: 32

SECRETARY OF STATE
TALL AHASSEE, FLORIDA

	IALLAHAGGEES LEGISLE
ARTICLE I NAME	
The name of the corporation shall be:	
New Augustine Tool Inc.	
ARTICLE II PRINCIPAL OFFICE	
The principal place of hysiness and mailing address of this corporation shall be:	
St. Augustine FL 32095	
St. Augustine FL 32095	
ARTICLE III SHARES The number of shares of stock that this corporation is authorized to have outstanding a	nt any one time is:
200 Shaers	
ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADD	RESS
The name and Florida street address of the initial registered agent are:	
NAMOY DE BURN de Leon Blud.	
St. Augustine Fl 32095	
ARTICLE V INCORPORATOR	
The name and address of the incorporator to these Articles of Incorporation are:	÷
Emil Cologna, Jr	
1125 Kings Estate Hd.	
St. Augustine FC. 32086	
Comil Colomb 5-1-0	5 0
Signature/Incorporator	Date

(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

Stricture/Registered Agent S-1-00
Date