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

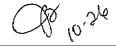
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Material Handling Industrial Parts, Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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\$70.00 Filing Fee	ar and one(1) copy of the article \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 \$\frac{1}{2}\$\$87.50 \$\frac{1}{2}\$\$Filing Fee, Certified Copy & Certificate of Status	Mars Contoh
FROM: Charles D.Painter Name (Printed or typed)				
4418 Antisdale Street Address				-
Jacksonville, FL 32205 City, State & Zip				
	904-545-9/78 Daytime Telephone number			

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





In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

Article 1 Name

Material Handling Industrial Parts, Inc.

Article II Principal Office

4418 Antisdale Street Jacksonville, FL 32205

Article III Purpose

Wholesaler of Industrial Forklift Parts

Article IV Shares

1000

Article V Initial Officers / Directors

Charles D. Painter 4418 Antisdale Street Jacksonville, FL 32205

Article VI Registered Agent

Charles D. Painter 4418 Antisdale Street Jacksonville, FL 32205

Article VII Incorporator

Charles D. Painter 4418 Antisdale Street Jacksonville, FL 32205

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment and agree to act in this capacity.

Signature / Registered Agent

Signature / Incornarator

10-23-2000

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