TRANSMITTAL LETTER

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

SUBJECT:	MASTERCRAN (PROPOSED CORPORA)	FT INTER	10000348L -11/29/10-1 2/0/85*****///90)
	(====================================			
Enclosed is an origin	al and one(1) copy of the article	s of incorporation and a c	check for:	
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	□ \$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	
FROM:	Nisam Mo Name (Pri 9320 NW A SUNRISE 7 City, S 954-683 Daytime Tel	HAMMED inted or typed) 34th Cooddress 2A 3335 tate & Zip 4273. ephone number	SLUKETARY OF STATE TALLAHASSEE, FLORIDA	FILED 00 NOV 29 PM 2: 18
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NOTE: Please provide the original and one copy of the articles.

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ARTICLES OF INCORPORATION

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

The name of the corporation shall be:

MASTERCRAFT [NTERIORS INC.

ARTICLE II PRINCIPAL OFFICE
The principal place of business/mailing address is:

7329 LAKE UNDERHILL ROAD. ORLANDO FLA. 32822.

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

REGISTERED AGENT

The name and Florida street address of the registered agent is:

NÎSAN MOHAMMED. 9320 NW 34th COURT. SUNRISE FLA. 23351.

ARTICLE VII **INCORPORATOR**

The name and address of the Incorporator is:

MISAN MOHAMMED. 9320 NW 34th COURT SUNRISE FLA 33351

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 as registered agent and agree to act in this capacity

 $\frac{1/27/m}{\text{Date}}$