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SCORETARY OF STATE TALLAHASSEE, FLORIDA

Florida Department of State Division Of Corporations P.O. Box 6327

RE: ETS Interiors, Inc.

Tallahassee, Fl. 32314

700004439787---6 -06/25/01--01126--015 ****122.50 *****78.75

Gentlemen:

Enclosed please find the original and one copy of the Articles of Incorporation, together with my check in the amount of \$122.50.

This represents the cost of the Filing Fees, Certified Copy of Articles of Incorporation and Fee for Registered Designation for the above named corporation.

Very Truly Yours.

Douglas I. Smith ETS Interiors, Inc.

ETS Interiors, Inc. 19800 Veterans Blvd. Port Charlotte, Fl. 33948 941-235-2288

ARTICI	LES OF INCORPORATION	
	of	F11 2
ETS Inter	iors Inc.	iness Corporation Act, adopt(s)
	(name of corporation)	7.9500 PM10
The undersigned acting as the incorporators of the following articles of incorporation for such corporation for such corporation.	f a corporation under the Florida Bus oration:	iness Corporation Act, adopt(s)
	ICLE I - CORPORATE NAME	
The name of the corporation is:		
ETS Interiors	s Inc	
A	ARTICLE II - DURATION	
This corporation shall exist perpetually unless	dissolved according to Florida law.	
A	ARTICLE III - PURPOSE	
The corporation is organized for the purpose o Jnited States and the State of Florida.	f engaging in any activities or busing	ess permitted under the laws of the
	TICLE IV - CAPITAL STOCK	
The corporation is authorized to issue50	shares of common stock, par va	lue \$ per share.
ARTICLE The street address of the initial principal office	V - INITIAL PRINCIPAL OFFICE and, if different, the mailing address	s is:
STREET ADDRESS 19800 Veter	ans Blud.	
CITY Pt. Charlotte	FLORIDA	ZIP 33948
Mailing address, if different		,,,,,,
STREET ADDRESS		
CITY	FLORIDA	ZIP
ARTICLE VI - INIT	IAL REGISTERED OFFICE ANI	D AGENT
The street address of the initial registered of		
NAME Douglas L. Sm	. 1	
ADDRESS 19800 Neterans	Blud.	
CITY Pt. Clarentte	FLORIDA	ZIP 22948

ARTICLE VII - INITIAL BOARD OF DIRECTORS

This corporation shall have One either increased or diminished from time to time by the addresses of the initial director(s) of the corporation are	By-Laws, but shall never be less that	ne number of directors may be n one (1). The names and
NAME Douglas L. S.	mith	
NAME Douglas L. S. ADDRESS 1385 Vermouth	Lane	
CITY Punta Gorda	STATE F/.	ZIP <i>33983</i>
NAME	***	
ADDRESS		
CITY	STATE	ZIP
NAME	· · · · · · · · · · · · · · · · · · ·	
ADDRESS		·
CITY	STATE	ZIP
The names and addresses of the incorporators signing to NAME Douglas L. Smith	th	- 112
ADDRESS 1385 Vermouth CITY Punta Gorda NAME	state F1.	ZIP <i>33483</i>
ADDRESS		
CITY	STATE	ZIP
NAME		
ADDRESS		
CITY	STATE	ZIP
The undersigned incorporator(s) have executed the day of	ese Articles of Incorporation this	22 4
olanyéed 6/22/01 out, - Charlatte	Var	(Signature)
	Betty Jean McCurry MMISSION # CC673190 EXPIRES August 18, 2001 ED THRU TROY FAIN INSURANCE, INC.	(Signature)

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CERTIFICATE OF DESIGNATION REGISTERED AGENT/ REGISTERED OFFICE



ETS INTERIORS, INC.

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 19800 Veterans Blud.

has named Douglas L. Smith

located at the aforesaid address, as its registered agent to accept service of process within this state.

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)

(Date)