POLOGANSMIPTLE EFTER 36

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

SUBJECT:	The Shapina	ompany ate name - must include sur	CC)	
• •	(Proposed como		'00004690 -11/21/01(****122.50	687 31041016 *****87.5
Enclosed is an orig	ginal and one(1) copy of the article	s of incorporation and a	check for:	
\$70.00 Filing Fee		\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	
FROM	Name (Pr			
· · · · · · · · · · · · · · · · · · ·	Woot Palm Brack City,	St. North Address FL 33411 State & Zip	· •	
. :	57 / - 90 6 Daytime T	- 3236 elephone number		

D. WHITE DEC - 4 2001

*****87.50

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

ARTICLES OF INCORPORATION

The undersigned incorporator, f	or the purpo	se of forming a corp	oration under the Florida
Business Corporation Act, hereb			

The name of the corporation shall be:

The Shaping Company

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

13749 49th St. North West Palm Beach, FC 33411

ARTICLE III

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

five Thousand (5000) Thaves of one Dollar (1000) PAR Valve Common Stock

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

MARY Con TESSA CPA
13749 49 M St. North

West Palm Beach, FL 33411

INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

Diane Fischen

PO. BOX EE CARRABELLE, FL 32322

(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