0004655° MILES

January 07, 2002

Department of State, Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

Re:

THE TAMPA BAY LOCKSMITH, INC.

*****70.00

Ladies and Gentlemen:

Please find enclosed for filing one original and one copy of the Articles of Incorporation of THE TAMPA BAY LOCKSMITH, INC. Also enclosed is a check in the amount of \$70.00 as the appropriate filing fee.

Please return the copy, stamped to show the date of filing, to the undersigned.

Sincerely,

GARY COOPER

6902 N. ARMENIA AVE TAMPA, FL 33604

ARTICLES OF INCORPORATION

OF

OR IM 10 M 9.45

THE TAMPA BAY LOCKSMITH, INC.

ARTICLE I

The name of the Corporation is THE TAMPA BAY LOCKSMITH, INC.

ARTICLE II

The principal place of business and mailing address of this corporation shall be 6902 N. ARMENIA AVE, TAMPA, FL 33604.

ARTICLE III

The aggregate number of shares which the Corporation has authority to issue is 1,000 shares of common stock with no par value.

ARTICLE IV

The address of the initial registered office of the Corporation is 6902 N. ARMENIA AVE, TAMPA, Florida 33604, and the name of the Corporation's initial registered agent for service of process at such address is GARY COOPER.

ARTICLE V

The name and address of the incorporator to these Articles of Incorporation is: GARY COOPER, 6902 N. ARMENIA AVE, TAMPA, FL 33604.

GARY COOPER 6902 N. ARMENIA AVE TAMPA, FL 33604

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 607.0501 or 617.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

- 1. The name of the corporation is: THE TAMPA BAY LOCKSMITH, INC.
- 2. The name of the registered agent and office is:

GARY COOPER 6902 N. ARMENIA AVE TAMPA, Florida 33604

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

SEGRETARY OF STATE

FILED