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TRANSMITTAL LETTER

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

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SUBJECT:

LASER TECH SERVICES OF TAMPA BAY, INC.

500004980465--6

-02/21/02--01018--005 ******70.00 *****70.00

(Proposed corporate name-must include suffix)

Enclosed is an original and one (1) copy of the Articles of Incorporation and a check for

\$ 70.00

□ \$ 78.75

□ \$ 78.75

□ \$87.50

Filing Fee

Filing Fee & Certificate of Status Filing Fee & Certified Copy Filing Fee & Certified Copy &

Certificate Status

FROM:

LOU SEGADE

Name (printed or typed)

PO BOX 343

(Address)

SAFETY HARBOR, FL 34695

(City/State//Zip)

(727) 797-7718

(Day time telephone number)

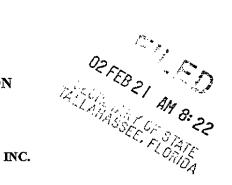
NOTE: Please provide the original and one (1) copy of the Articles

DIVISION OF CORPORATIONS, P.O. BOX 6327 TALLAHASSEE, FL 32314

QB2/26

ARTICLES OF INCORPORATION

OF



LASER TECH SERVICES OF TAMPA BAY, INC.

The undersigned incorporation (s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt (s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

LASER TECH SERVICES OF TAMPA BAY, INC.

ARTICLE II PRINCIPAL OFFICE

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

PO BOX 343 SAFETY HARBOR, FL 34695

ARTICLE III

CAPITAL STOCK

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

1000 SHARES NON-PAR

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

JAMES H. COLLIER, SR. 9110 STERLING LANE PORT RICHEY, FL 34668

ARTICLE V INCORPORATOR(S)

The name (s) and street address (s) of the Incorporator (s) to these Articles of Incorporation is (are):

LOU SEGADE (PRESIDENT) PO BOX 343 SAFETY HARBOR, FL 34695

19thDAY OF February 2002
Loce Song Le P_ Signature/Title
V-PSignature/Title
SECSignature/Title
Signature/Title
Signature/Title

The undersigned has (have) executed these Articles of Incorporation this

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE



PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, FLORIDA STATUATES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER 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:_		
LASER TECH SERVICES OF	TAMPA BAY, INC.	
The name and address of the registered agent and office	e is:	
JAMES H. COLLIE	ER SR	
(Name)		
9110 STERLING L		
(P. O. Box not acce	eptable)	
PORT RICHEY, FL	34668	
(City/State/Z		
I have been named as registered agent and to accept service of process for the aboved 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.		
Jun M / Men	2-14-02	
(Signature)	(Date)	