POZOOOS8662

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

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SUBJECT: SUNCOAST TOOL REPAIR INC.

OPROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is an origina	al and one(1) copy of the article	es of incorporation and a	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 Cop & Certificate Status PY REQUIRE	of	
FROM: DANGELLE BURGESS Name (Printed or typed)					
7335 ISLE DRIVE Address Address				02 APR - SECRETAI TALL AHAS	***********
PORT RICHET FL 34667 City, State & Zip				3 AN 9:34 RY OF STATE SET FLORIDA	
(727) 697 - 0/34 Daytime Telephone number				3t IDA	

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

104-10-02

ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit) ARTICLE I NAMEThe name of the corporation shall be: SUNCOAST TOOL KEPAIR, INC. ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 14606 MARINA ARIVE HUDSON, FL 34667 ARTICLE III PURPOSE The purpose for which the corporation is organized is: POWER TOOK MAINTENANCE & REPAIR ARTICLE IV SHARES The number of shares of stock is: ONE HUNDRED ARTICLE V INITIAL OFFICERS/DIRECTORS (optional) The name(s) and address(es): DANIELLE BURGESS 7005 ISLE DRIVE PORT RICHET, FL 3466P ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is: DANIELLE BURGESS 7335 ISLE PRIVE PORT RICHET IFL 3466P ARTICLE VII INCORPORATOR The name and address of the Incorporator is: DANIELLE BULGESS 7335 ISLE DRIVE POAT RICHEY FL 34 66P 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

Signature/Registered Agent

Date

Signature/Incorporator

X 4-1-0,2