PODOCOS 39207

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

000007137680--0 -08/15/02--01038--022 *****78.75 *****78.75

SUBJECT:	PROPOSED CORPORA	TE NAME - MUST INCLU	JDE SUFFIX)
. I	ginal and one (1) copy of the art		
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status
, FROM: _	MONAS A	e (Printed or typed)	0
	169 TEQ	Address	STE. 25 ESECUTION OF THE PROPERTY OF THE PROPE
	JEQUE: Cit	y, State & Zip	7 OFF STATES OF
	Daytime	Telephone number	7

NOTE - UE HAVE ENCLOSED A FEDEX AND CHARGE TO GOU

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



ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

INTEGRATED CONVECTIONS, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

ICA TEQUESTA DR. STE. 23 E TEQUESTA, IL 33469

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO PROVIDE PRODUCTS AND SERVICES ORGANIZATIONS AND BUSINESSES THAT

ARTICLE IV SHARES

The number of shares of stock is:

SX MUNDAED (GOO)

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

REGISTERED AGENT ARTICLE VI

The name and Florida street address of the registered agent is:

THOMAS L. DOMIN 169 TEQUESTA DR. STE 23E TEQUESTO, FL 33469

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

MOMAS L. DOMIN 169 TEQUESTA DR. STE 23E TEQUESTA, FL 33469

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

Signature/Incorporator