

TRANSMITTAL LETTER

PO2000102147

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

SUBJECT: REMODELING SOLUTIONS, INC.
Proposed corporate name - must include suffix

400007853744--2
-09/19/02--01084--003
*****78.75 *****78.75

Enclosed is and original and one (1) copy of the articles of incorporation and a check for \$78.75 in payment of the
Filing Fee & Certificate of Status.

FROM: SCHNEIDER FINANCIAL SERVICES, INC.

1402 ROYAL PALM BEACH BLVD

BUILDING 700, SUITE 110

ROYAL PALM BEACH, FL 33411

561-868-1868

Daytime Telephone Number

FILED
2002 SEP 19 AM 8:58
CLERK OF STATE
TALLAHASSEE FLORIDA

F. GIESSEN SEP 19

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

REMODELING SOLUTIONS, INC.

ARTICLE II PRINCIPLE OFFICE

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

**11401 9TH ST NORTH
APARTMENT 1412
ST. PETERSBURG, FL. 33716**

ARTICLE III SHARES

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

1,000 SHARES OF COMMON

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

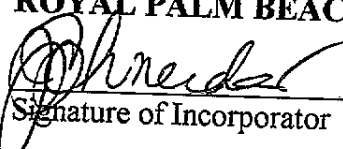
The name and Florida street address of the initial registered agent are:

**JEFFREY A. SCHNEIDER
SCHNEIDER FINANCIAL SERVICES, INC.
1402 ROYAL PALM BEACH BLVD
BUILDING 700, SUITE 110
ROYAL PALM BEACH, FL 33411**

ARTICLE V INCORPORATOR

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

**JEFFREY A. SCHNEIDER
SCHNEIDER FINANCIAL SERVICES, INC.
1402 ROYAL PALM BEACH BLVD
BUILDING 700, SUITE 110
ROYAL PALM BEACH, FL 33411**


Signature of Incorporator

9/16/2002
Date

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certification, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provision of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.


Signature of Registered Agent

9/16/2002
Date

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STATE OF FLORIDA
TALLAHASSEE