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To: Division of Corporations
Fax Number : (850)205-0381

From: Account Name : FAS-T CORP. AGENTS, INC.
Account Number : 071001002335
Phone : (305)599-0839
Fax Number : (305)716-0346

FLORIDA PROFIT CORPORATION OR P.A.

M & M PAINTING & RESTORATION, CORP.

Certificate of Status	0
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**ARTICLES OF INCORPORATION
OF**

M & M PAINTING & RESTORATION, CORP.

The undersigned Incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s)

ARTICLE I- NAME

The name of the corporation shall be:

M & M PAINTING & RESTORATION, CORP.

ARTICLE II- PRINCIPAL OFFICE

The principle place of business and mailing of this corporation shall be:

**8680 NW 3 LANE #4
MIAMI, FLORIDA 33126**

ARTICLE III- SHARES

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

100 Shares of Common Stock

ARTICLE IV-INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

**MYNOR RENE VARGAS 261 SW 12 ST. # 12
MIAMI, FL 33130**

ARTICLE V- INCORPORATOR

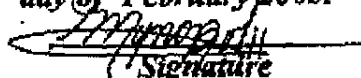
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The name and street address of the incorporator to these Articles of Incorporation is: MYNOR RENE VARGAS 261 SW 12 ST. #12 MIAMI, FL 33130

The undersigned incorporator has executed these Articles of Incorporation this 1st day of February 2003.


Signature

ARTICLE VI-DIRECTORS(S)

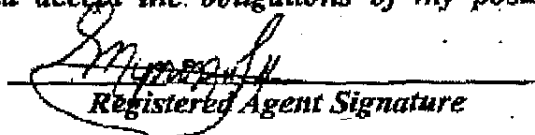
The name(s) and street address(es) of the directors(s) to these Articles of Incorporation is (are):

MYNOR RENE VARGAS (President/Director) 261 SW 12 ST. #12 MIAMI, FL 33130

MYNOR M. CASTELLANOS (Vice-President) 8680 NW 3 LANE #4 MIAMI, FL 33126

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

Having been named as Registered Agent and to accept service of process for the above stated corporation at 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 related to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as Registered Agent.


Registered Agent Signature