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Florida Department of State
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To:

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

From:

Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305) 634-3694
Fax Number : (305) 633-9696

FILED
03 MAR -7 PM 1:02
SECRETARY OF STATE
TALLAHASSEE FLORIDA

FLORIDA PROFIT CORPORATION OR P.A.

ADVANCE EQUIPMENT SUPPLIES MANUFACTURING CORP.

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$78.75

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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.

03 MAR -7 PM 1:02

SECRETARY OF STATE
TALLAHASSEE FLORIDA**ARTICLE I NAME**

The name of the corporation shall be:

ADVANCE EQUIPMENT SUPPLIES MANUFACTURING CORP.

ARTICLE II PRINCIPAL OFFICE

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

1840 S.W. 92 PLACE
MIAMI, FL 33185**ARTICLE III SHARES**

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

100 SHARES

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

RITA M. CARDOSO
1840 S.W. 92 PLACE
MIAMI, FL 33185**ARTICLE V INCORPORATOR**

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

RITA M. CARDOSO
1840 S.W. 92 PLACE
MIAMI, FL 33185

Signature of Incorporator

Date

3-6-03

(An additional article must be added if an effective date is requested.)

Having been named as registered agent and to accept service of process for the above 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.

Signature of Registered Agent

Date

3-6-03

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