

Division of Corporations
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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.

J.P. CONSTRUCTION SERVICES, INC.

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

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ARTICLESOF INCORPORATION

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

J.P. CONSTRUCTION SERVICES, INC.

ARTICLE I - NAME

The name of the corporation shall be:

J.P. CONSTRUCTION SERVICES, INC.

ARTICLE II ~ PRINCIPLE OFFICE

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

7620 SW, 10 ST, # 2 N. LAUDERDALE, FL, 33068

ARTICLE III - SHARES

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

ONE HUNDRED SHARES (100)

ARTICLES IV - INITIAL REGISTERED AGENT AND STREET ADRESS

The name and address of the initial registered agent is:

ELVIN JAVIER PAZ 7620 SW. 10 ST. # 2 N. LAUDERDALE, FL. 33068

ARTICLE V - INCORPORATOR(S)

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

ELVIN JAVIER PAZ 7620 SW. 10 ST. # 2 N. LAUDERDALE, FL. 33068 The undersigned incorporator(s) has (bave) executed these Articles of Incorporation This 21ST Day of MAY, 2003.

Signature

ARTICLE VI- DIRECTOR(S)

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

ELVIN JAVTER PAZ 7620 SW. 10 ST. # 2 N. LAUDERIDALE, FL. 33068

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

SECUETARY OF STATE IALLAND SEEL, FLORING