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SEPARATE FLORIDI

May	20	2001	
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Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

·	Re:	MVL Erectors	, Inc.
Gentlemen:			
Enclosed please find the check in the amount of		d one copy of the Article	es of Incorporation, together with my
This represents the coabove named corporati		ng Fees and Fee for Re	egistered Agent Designation for the
		Very truly yours.	
		i Urhal ech	's Name)
		MVL Erector (Name of Co	rs, Inc.
		MAILING ADD	DRESS OF CORPORATION
		411 N. Willov	v Avenue
		Port Orange,	FL 32127
		Ī	

(386) 304-4391 Area Code Number

PHONE -

Ext,

ARTICLES OF INCORPORATION of

MVL Erecto	ors, Inc.	
	e of corporation)	
The undersigned acting as the incorporators of a adopt(s) the following articles of incorporation for		Florida Business St Boration Act,
The name of the corporation is:	- CORPORATE NAM	E 7:19
MVL Erectors	Inc.	
ARTICATION This corporation shall exist perpetually unless disconnected to the corporation of the corporatio	LE II – DURATION issolved according to Fl	D1
ARTIC The corporation is organized for the purpose of laws of the United States and the State of Florida.	CLE III - PURPOSE engaging in any activiti	es or business permitted under the
ARTICLE II The corporation is authorized to issue 100 s	IV - CAPITAL STOCK hares of common stock,	-
ARTICLE V - II The street address of the initial principal office a	NITIAL PRINCIPAL O	
STREET ADDRESS		
411 N. Willow Avenue		
CITY Port Orange FLOI	RIDA	ZIP 32127
Mailing address, if different		
STREET ADDRESS Same as above		
CITY	FLORIDA	ZIP
ARTICLE VI - INITIAL The street address of the initial registered office		
NAME Michael Van Leuven		
ADDRESS 411 N. Willow Avenue		

FLORIDA

ZIP 32127

CITY

Port Orange

ADDRESS			
	411 N. Willow Avenue		
CITY	Port Orange	STATE FL	ZIP 32127
NAME	April Van Leuven		
ADDRESS	411 N. Willow Avenue		
CITY	Port Orange	STATE FL	ZIP 32127
NAME			
ADDRESS			
CITY		STATE	ZIP
NAME	Michael Van Leuven	ora arguma mese Articles of meory	poration are as follows:
·		ors signing these Articles of Incom	poration are as follows:
NAME	Michael Van Leuven	STATE FL	ZIP 32127
NAME ADDRESS	Michael Van Leuven 411 N. Willow Avenue		
NAME ADDRESS CITY	Michael Van Leuven 411 N. Willow Avenue Port Orange		
NAME ADDRESS CITY NAME ADDRESS	Michael Van Leuven 411 N. Willow Avenue Port Orange April Van Leuven		
NAME ADDRESS CITY NAME	Michael Van Leuven 411 N. Willow Avenue Port Orange April Van Leuven 411 N. Willow Avenue	STATE FL	ZIP 32127
NAME ADDRESS CITY NAME ADDRESS CITY	Michael Van Leuven 411 N. Willow Avenue Port Orange April Van Leuven 411 N. Willow Avenue	STATE FL	ZIP 32127
NAME ADDRESS CITY NAME ADDRESS CITY NAME	Michael Van Leuven 411 N. Willow Avenue Port Orange April Van Leuven 411 N. Willow Avenue	STATE FL	ZIP 32127

(Signature)

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

FILED

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

MVL Erectors, Inc.
Pursuant of Florida Statutes Sections 48.091 and 607.0501, the following is submitted:
The above corporation, organized under the laws of the State of Florida with its registered office
as indicated in the Articles of Incorporation
at 411 N. Willow Avenue
Port Orange, FL 32127
has named Michael Van Leuven
located at the aforesaid address, as its registered agent to accept service of process within this
state.
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.
/

May 20, 2003

(Date)