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SECNELARY OF STATE

10.21.03

ALLAN C. DRAVES

ATTORNEY AND COUNTELLOR AT LAW
340 NORTH ORANGE AVENUE
ORLANDO, FLORIDA 32801

TELEPHONE (407) 422-2462 FACSIMTEE (407) 422-2449 POST OFFICE BOX 4 ORLANDO, FLORIDA 32802

October 14, 2003

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

Re: Silcraft, Inc.

To whom it may concern:

Please be advised that I represent Tim Brown in connection with the foregoing.

I enclose herewith the following:

My client's check number 918 in the amount of \$78.75, representing payment in full of filing fee (\$35.00), fee for designation of registered agent (\$35.00), and \$8.75 for a certified copy of the Articles of Incorporation.

Original and one copy of Articles of Incorporation, Designation of and Acceptance by Resident Agent.

Please mail the certified copy of the Articles of Incorporation, Designation of and Acceptance by Resident Agent to Silcraft, Inc. c/o Allan C. Draves, P. O. Box 4, Orlando, FL 32802.

Please call me with any questions. Thank you for your cooperation and assistance.

Very truly yours,

Allan C. Draves

ACD/cgf Encls.

Pc: Tim Brown

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ARTICLES OF INCORPORATION

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

SILCRAFT, INC.

OF_

The undersigned subscriber to these Articles of Incorporation, a natural person competent to contract, hereby forms this corporation under the laws of the State of Florida.

ARTICLE I

NAME

The name of the corporation is Silcraft, Inc.

ARTICLE II

ADDRESS

The street address of the corporation's initial principal office is 244 W. Orlando St., Orlando, Florida 32804.

ARTICLE III

CAPITAL STOCK

The maximum number of shares of stock that this corporation is authorized to have outstanding at any one time is one thousand (1000) shares of common stock. Each share shall have a par value of \$1.00 per share.

ARTICLE IV

PURPOSE/NATURE OF BUSINESS

This corporation may engage in or transact any and all lawful activities or business permitted under the laws of the United States, the State of Florida or of any other state, county, territory or nation.

ARTICLE V

SPECIAL PROVISIONS

The stock of this corporation is intended to qualify under the requirements of Section 1244 of the Internal Revenue Code and the regulations issued thereunder. Such actions as may be necessary shall be deemed to have been taken by the appropriate officers to accomplish compliance.

ARTICLE VI

REGISTERED OFFICE/AGENT

The street address of the initial registered office of the corporation shall be 244 W. Orlando St., Orlando, Florida 32804 and the name of the initial Registered Agent for the corporation is Timothy Brown.

ARTICLE VII

TERM OF EXISTENCE

This corporation shall exist perpetually.

ARTICLE VIII

LIMITATION OF LIABILITY

Each director, shareholder, officer and registered agent, in consideration for his or her services, and in the absence of fraud or willful wrongdoing, shall be indemnified, whether then in office or not, for any and all reasonable costs or expenses incurred by him or her in connection with the defense of or for advice concerning, any claim asserted or proceeding brought against him or her by reason of his or her being or having been a director, shareholder, officer or registered agent of the corporation or of any subsidiary of the corporation, whether or not wholly owned, to the maximum extent permitted by law. The foregoing right of indemnification shall be inclusive of any other rights to which any director, shareholder, officer or registered agent may be entitled as a matter of law.

ARTICLE IX

DIRECTORS

This corporation shall have a minimum of one director.

ARTICLE X

INCORPORATOR

The name and address of the Incorporator is:

Timothy Brown 244 W. Orlando St. Orlando, Florida 32804

IN WITNESS WHEREOF, the undersigned has hereunto set his hand this /3 day of October, 2003.

INCORPORATOR:

TIMOTHI GROWN

STATE OF FLORIDA COUNTY OF ORANGE

Execution of the foregoing instrument was acknowledged before me this October 12, 2003 by Timothy Brown, who is personally known to me OR who produced as identification and who did/did not take an oath.

Notary Public

Sign:

Print:_

My Commission expires:



Allan C. Draves
MY COMMISSION # DD145716 EXPIRES
October 21, 2006
BONDED THRU TROY FAIN INSURANCE, INC.

FILED

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SECRETARY OF STATE
TALL AHASSEE, FLORIDA

DESIGNATION OF AND ACCEPTANCE BY REGISTERED AGENT

The following is submitted in compliance with the laws of the State of Florida:

Silcraft, Inc., a corporation organized under the laws of the State of Florida, with its principal office located at 244 W. Orlando St., Orlando, Florida 32804, has named Timothy Brown, whose address is 244 W. Orlando St., Orlando, Florida 32804, as its Registered Agent to accept service of process within this State.

ACCEPTANCE

Having been named as Registered Agent to accept service of process for the above-named corporation at the place designated in this certificate, I state that I am familiar with the duties and responsibilities of Registered Agent and accept such appointment and agree to act in said capacity.

REGISTERED AGENT

Timothy Brown

STATE OF FLORIDA COUNTY OF ORANGE

Execution of the foregoing instrument was acknowledged before me this October 1 2, 2003 by Timothy Brown, who is personally known to me OR who produced ______ as identification and who did/did not take an oath.

Notary Public

Sign:

My Commission expires:___

(SEAL)

Allan C. Draves MY COMMISSION # DD145716 EXPIRES October 21, 2006 BONDED THEU TROY FAM INSURANCE INC.