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SECRETARY OF STATE
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TRANSMITTAL LETTER

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

SUBJECT: CLA	RINS ROOFING, INC		
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	ude suffix)
Enclosed are an orig	ginal and one (1) copy of the art	icles of incorporation and	a check for:
\$70.00 Filing Fee		\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED
FROM: J	OSUE DURAN		
	Name	(Printed or typed)	
	41 N. ALDER DRIVE		
, , , , , , , , , , , , , , , , , , ,		Address	
	ORLANDO FL. 32807		
	City	, State & Zip	
	(321) 299-5269		
i	Daytime '	Felephone number	·

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

CLARINS ROOFING, INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 41 N. ALDER DRIVE ORLANDO FL. 32807

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To engage in any lawful activity permitted by the laws of this State.

ARTICLE IV SHARES

The number of shares of stock is: 10,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Josue Duran 41 N. Alder Drive Orlando Fl. 32807

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

Josue Duran 41 N. Alder Drive Orlando Fl. 32807

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Josue Duran 41 N. Alder Drive Orlando Fl. 32807

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Signature/Registered Agent October 17/2003

October 17/2003

October 17/2003

Signature/Incorporator Date

SECREMICE FLORIDA
TALLAMASSES, FLORIDA