

Florida Department of State

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FLORIDA PROFIT CORPORATION OR P.A.

HAGAN FLOOR COVERING, INC.

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TALLAHASSEE FLORIDA

ARTICLES OF INCORPORATION

OF

HAGAN FLOOR COVERING, INC.

ARTICLE I NAME

The name of the corporation shall be: HAGAN FLOOR COVERING, INC.

ARTICLE II PRINCIPAL OFFICE

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

6453 27TH AVENUE NORTH ST. PETERSBURG, FL 33710

ARTICLE III PURPOSE

Specific purpose for a "Professional Corporation"

ARTICLE IV DURATION

The duration of the corporation shall be perpetual and effective 01/01/04.

ARTICLE V CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: Fifteen Hundred shares at no par value.

ARTICLE VI INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

STEPHEN J. HAGAN 6453 27TH AVENUE NORTH ST. PETERSBURG, FL 33710

ARTICLE VII INCORPORATOR

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

STEPHEN J. HAGAN 6453 27TH AVENUE NORTH ST. PETERSBURG, FL 33710

A. HAGAN Incorporator

The undersigned has executed these Articles of Incorporation this 24 day of November 2003.

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CERTIFICATE OF DESIGNATION

REGISTERED AGENT/REGISTERED OFFICE

TALLAHASSEE FLORIDA

Pursuant to the provisions of Section 607.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the state of Florida.

1. The name of the corporation is:

HAGAN FLOOR COVERING, INC.

2. The name and address of the registered agent and office is:

STEPHEN J. HAGAN 6453 27TH AVENUE NORTH

ST, PETERSBURG, JL 33710

Title: PRESIDENT

Signature:

Date: NOVEMBER Zf., 2003

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:

Date: NOVEMBER 25 2003

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