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(Requestor's Name)

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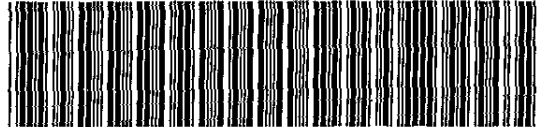
(Business Entity Name)

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TALLAHASSEE FLORIDA

gt 1/16/04

January 5, 2004

Florida Division of Corporations
New Filings Section
P.O. Box 6327
Tallahassee, Florida 32314

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

Dear Sir or Madam:

Please find enclosed the initial filing fee of \$70.00. Please forward the Articles of Incorporation and Certification to the following address:

Thomas D. Outlan
323 Howard Blvd
Longwood, Florida 32750

Please direct any questions to me at 407-221-1210.

Thank you.



Thomas D. Outlan

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida General Corporation Act, hereby adopts the following Articles of Incorporation.

Article 1

The Name of the Corporation shall be: Outlan Flooring Installations, Inc.

Article 2

The principle place of business is:

Outlan Flooring Installations, Inc.
323 Howard Blvd
Longwood, Florida 32750

The mailing address of the Corporation is:

Outlan Flooring Installations, Inc.
323 Howard Blvd.
Longwood, Florida 32750

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TALLAHASSEE FLORIDA

Article 3

The Corporation is authorized to issue one class of stock, that being 1000 shares of \$1 par value, common stock, with identical rights and privileges, the transfer of which is restricted according to the bylaws of the corporation. Initial stock subscriptions and officers are as follows:

Thomas D. Outlan	President/Secretary	100 shares
Charles D. Outlan	Vice President/Treasurer	0 shares

Article 4

The name and address of the initial registered agent is:

Thomas D. Outlan
323 Howard Blvd
Longwood, Florida 32750

Article 5

The name and address of the incorporator is:

Thomas D. Outlan
323 Howard Blvd
Longwood, Florida 32750

1-5-04

Date



Signature/Incorporator

**CERTIFICATE OF DESIGNATION
OF
REGISTERED OFFICE AND AGENT**

**Outlan Flooring Installations, Inc.
323 Howard Blvd
Longwood, Florida 32750**

Having been named as the 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 of registered agent

1-5-04
Date

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STATE OF FLORIDA
TALLAHASSEE