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To:

Division of Corporations

Fax Number : (850)205-0381

From:

Account Name : INCORPORATETIME.COM, INC.

Account Number : I19990000221 Phone : (631)224-9004 Fax Number : (631)589-2848

FLORIDA PROFIT CORPORATION OR P.A.

Luzon's Carpet Service, Inc.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$70.00

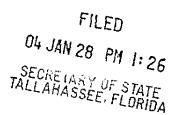
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1/27/2004

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ARTICLES OF INCORPORATION

THE UNDERSIGNED INCORPORATION FOR THE PURPOSE OF FORMING A CORPORATION UNDER THE FLORIDA BUSINESS CORPORATION ACT, HEREBY ADOPTS THE FOLLOWING ARTICLES OF INCORPORATION.

ARTICLE I -NAME

THE NAME OF THE CORPORATION SHALL BE:

Luzon's Carpet Service, Inc.

ARTICLE II -PRINCIPAL OFFICE

The principal place of business & mailing address of this corporation shall be

5549 Quist Drive Port Richey, FL 34668

ARTICLE III -SHARES

The number of shares of stock that this corporation is authorized to have at any one time is:

2000 shares at \$.01 par value

ARTICLE IV - INITIAL OFFICERS/DIRECTORS:

President:

Stephen Luzon

5549 Quist Drive, Port Richey, FL 34668

V.President: Brian Leary

10831 Premiere Dr. Port Richay, FT. 34668

Treasurer:

Stephen Luzon

5549 Quist Drive, Port Richey, FL, 34668

Secretary:

Stephen Luzon

5549 Quist Drive, Port Richey, FL 34668

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Director:

Stephen Luzon

5549 Quist Drive, Port Richey, FL 34668

ARTICLE V -INITIAL REGISTERED AGENT AND STREET ADDRESS:

The name and Florida street address of the initial registered agent are:

Stephen Luzon 5549 Quist Drive Port Richey, FL 34668

ARTICLE VI-INCORPORATOR:

The name and address of the Incorporator to these Articles of Incorporation are:

Kerry Walsh IncorporateTime.com, Inc. 35-37 Carleton Avenue, Sulte 200 Islip Terrace, NY 11752

Kerry Walsh, Incorporator

Date

Having been named registered agent and to accept service of process for the above stated corporation as 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.

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SECREPARTE FLORIDA