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Florida Department of State  
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To:

Division of Corporations  
Fax Number : (850) 205-0381

From:

Account Name : ACCOUNTING & BEYOND  
Account Number : I19990000223  
Phone : (813) 998-9800  
Fax Number : (813) 935-9982

FLORIDA PROFIT CORPORATION OR P.A.

WRAP USA, INC.

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$78.75

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**ARTICLES OF INCORPORATION**

The undersigned incorporator, 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:

WRAP USA, INC.

**ARTICLE II PRINCIPAL OFFICE**

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

9808 OAKS ST., TAMPA, FL 33635

**ARTICLE III SHARES**

The number of shares of stock that this corporation is authorized to have outstanding at any one time is (1,000).

**ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS**

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

MICHAEL H. HARTNETT

9808 OAKS ST.

TAMPA, FL 33635

**ARTICLE V INCORPORATOR**

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

MICHAEL H. HARTNETT

9808 OAKS ST.

TAMPA, FL 33635

**ARTICLE V BOARD OF DIRECTORS AND OFFICERS**

The initial Board of Directors shall consist of a total of 2 person(s). The name and address(es) of the person(s) who shall serve as the initial director(s) and officer(s) are:

President and Director

MICHAEL H. HARTNETT

9808 OAKS ST.

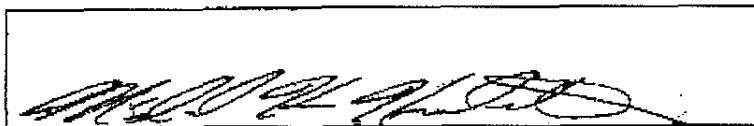
TAMPA, FL 33635

Vice President and Director

SANTINA MARIE NEGRON

9808 OAKS ST.

TAMPA, FL 33635

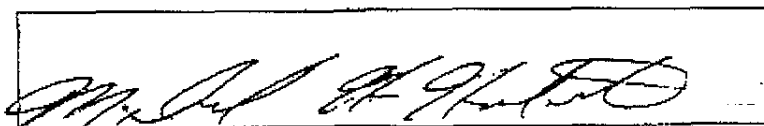


Signature/Incorporator

1-20-04

Date

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/Registered Agent

1-20-04

Date