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FLORIDA PROFIT CORPORATION OR P.A.

A-1 TEXTURE INC.

Certificate of Status	1
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ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

A-1 TEXTURE INC.

ARTICLE II PRINCIPAL OFFICE

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

A-1 TEXTURE INC.

1312 E. 149th Avenue Lutz, FL 33549 SECTETARY OF STATE
OIVISION OF CORPORATIONS

ARTICLE III SHARES

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

100 Shares at No Par Value

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and address of the initial registered agent is:

David A. Shirley 524 Riverside Drive Tarponsprings, FL 34689

Prepared By:
Bruce B. Hubbard
77 East John St.
Hicksville, New York 11801,
1-516-935-3940

ARTICLES V INITIAL OFFICER(S)/DIRECTOR(S)

The name(s) and street address(es) and title(s) to these Articles of Incorporation is(are):

David A. Shirley - 524 Riverside Drive, Tarponsprings, FL 34689 - President Ron Mueck - 106 Sandy Drive, Tampa, FL 33615 - Secretary

ARTICLES VI INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

David A. Shirley
524 Riverside Drive
Tarponsprings, FL 34689

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

28th day of January 2004.

David A. Shirley - Signature

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

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 THE DESIGNATING THE REGISTERED OFFICE/AGENT, IN THE STATE OF FLORIDA.

1.	The	name	of	the	corporation	is.	A-1	TEXT	URE	INC
	T. T.T.	1101111	O.	4.10	COLDOIAGION	10.	~ ~ ~~		~~~	

2.	The name and	address of	the registered	agent and o	ffice is
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David A. Shirley	· · ·
Name	
524 Riverside Drive	
(P.O. Box or Mail Drop Box NOT Acceptable)	
Tarponsprings, FL 34689	
(City / State / Zip)	

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 the statutes relating to the proper and complete performance of my duties, and am familiar with and accept the Tobligations of my position as registered agent.

David A. Shirley SIGNATURE

January 28, 2004 (Date)