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LAZARUS CORPORATE FILINO	SERVICE		
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CORPORATION NAME(S) & DOC	TUMENT NUMBER(S)	(if known):	
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NEW FILINGS	AMENDMENTS		
Profit	Amendment		
NonProfit	Resignation of R.A., Officer/Director		
. Limited Liability	Change of Registered Agent		
Domestication	Dissolution/Withdrawal		
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OTHER FILNGS	REGISTRATION/		
Annual Report	QUALIFICATION	* 1 . * *	
Fictitious Name —	Foreign		
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Examiner's Initials

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:

DP CARpentry INC.

ARTICLE II - PRINCIPAL OFFICE

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

120 TAMIAMI CAUAL Rd. MAMI FL. 33144

ARTICLE III -SHARES

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

100 54ARES

ARTICLES IV -INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

DOMINGO PALARIÓS 120 TAMIAMI CANAF Rd WIAMI FL. 33144

<u>ARTICLE V - INCORPORATOR</u>

The name and street address of the i Incorporation is:	ncorporator to these Articles of
DOMINGO PALADIOS	0 ((0 /
CARIDAD PALACIOS	120 TAMIAMI (ADAL Rd. MIRAMI FL. 33144 secuted these Articles of
The undersioned in constant	Misser FL. 33144
Incorporation this 27 day of 49	ecuted these Articles of
	hot
Signatu	ure .
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ARTICLE VI- DIRECTOR(S)

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

DOMINGO PATARIOS President CARIDAD PATARIOS VICE ADESIGNAT.

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT / REGISTERED OFFICE

Having been named as Registered Agent and to accept service of process for the above stated corporation at 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 related to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as Registered Agent.

Registered Agent Signature