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(Requestor's Name)				
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Certified Copies	Certificates of Status			
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TRANSMITTAL LETTER

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

SUBJECT:	JOE WALLACE	E CARPENT	RY MC.		
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)		
Enclosed are an orig	inal and one (1) copy of the arti	cles of incorporation and	a check for:		
\$70.00	\$78.75	\$78.75	\$87.50		
Filing Fee	Filing Fee & Certificate of Status	Filing Fee & Certified Copy	Filing Fee, Certified Copy		
	C Cornifolia of Sulpus	(communication)	& Certificate of		
		ADDITIONAL CO	Status PPY REQUIRED		
FROM: Joseph WALLACE Name (Printed or typed)					
3591 NW 17 Street					
F-1112 COTAL C 2271-4103					
FT HAVDERDALE FL 33311-4203					
		448-0411			
Daytime Telephone number					

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit) ARTICLE I <u>NAME</u> The name of the corporation shall be: JOE WALLACE CARPENTRY, INC. ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 3591 NW 17 STREET FT, LANDERDALE, FL 33311-4203 ARTICLE III PURPOSE The purpose for which the corporation is organized is: CARPENTRY ARTICLE IV SHARES The number of shares of stock is: 100 ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s): JOSEPH WALLACE, PRESIDENT ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: JOSEPH Wallace FT. LAVDERDALE, FL 3591 NW 17 St., FT. LAVDERDALE, FL ARTICLE VII INCORPORATOR The name and address of the Incorporator is: 3591 NW 17 ST. FT. LAUDERDALE FL 33311-4203 Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate. Fam familiar with and accept the appointment as registered agent and agree to act in this capacity

Signature/Incorporator