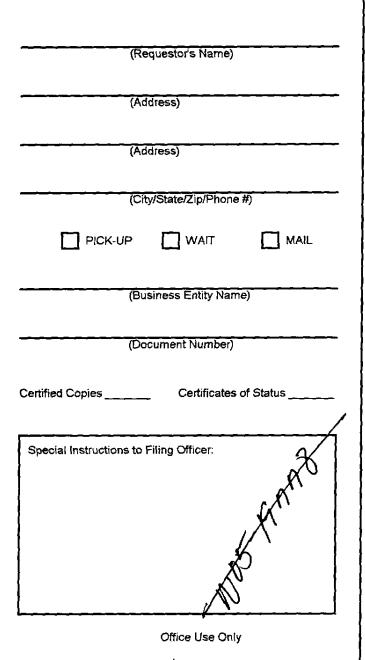
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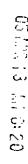






800050407228

EFFECTIVE DATE



TRANSMITTAL LETTER

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

SUBJECT:	TNT Home Repair Inc. (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)		
Enclosed are an origi	inal and one (1) copy of the artic		
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate (f Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status
FROM:	903 Avenue M S	Printed or typed)	
-	Winter Haven E City, S	FL 33880 State & Zip	
	Davtime 1 e	lephone number	

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



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

April 19, 2005

ANTHONY M. REID 903 AVENUE M SE WINTER HAVEN, FL 33880

SUBJECT: TNT HOME REPAIR INC.

Ref. Number: W05000019778

We have received your document for TNT HOME REPAIR INC.. However, the document has not been filed and is being returned for the following:

The registered agent and street address must be consistent wherever it appears in your document.

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with an address and telephone number where you can be reached during working hours.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6934.

Loria Poole Document Specialist New Filings Section

Letter Number: 705A00026826

OF

TNT Home Repairs Inc.

THE UNDERSIGNED, being over the age of eighteen years, in order to form a corporation pursuant to the provisions of the Corporate Code, hereby certifies as follows:

Article I Identification

The name of the corporation, hereinafter referred to as the "Corporation," is TNT Home Repair Inc.

Article II Period of Existence

The period during which the corporation shall continue is perpetual.

Article III Registered Office and Registered Agent

The address of the initial registered office of the Corporation is 903 Avenue M SE, Winter Haven FL 33880 and the name and address of the initial registered agent therein and in charge thereof, upon whom process against the Corporation may be served, is Anthony M Reid, 903 Avenue M SE, Winter Haven FL 33880. The mailing address for the Corporation is 903 Avenue M SE, Winter Haven FL 33880.

Article IV Purpose

The purpose of the Corporation is to engage in any or all lawful business for which corporations may be organized under the provisions of the General Corporation Law of Florida.

Article V Shares

The total authorized capital stock of the Corporation is 100 shares having a Par Value of \$1.00. All or any part of said shares may be issued by the Corporation from time to time and for such consideration as may be determined upon or fixed by the Board of Directors, as provided by law.

EFFECTIVE BATE

Article VI Incorporator's Address

The name and post office address of the Incorporator(s) and initial Director(s) of the Corporation is as follows:

President:
Anthony M Reid

903 Avenue M SE Winter Haven FL 33880 Vice-President: Mike Morony

2025 Spirit Lake Road Winter Haven FL 33880

The effective date of this Article of Incorporation shall be 04 06, 2005.

IN WITNESS WHEREOF, the undersigned Incorporator(s) has caused this Article of Incorporation to be executed as of 04 0(2., 2005).

Incorporator

Incorporator

STATE OF FLORIDA)
COUNTY OF POLK)

The forgoing Articles of Incorporation were acknowledged before me, this ______

day of Apres , 2005.

NOTARY PUBLIC State of Florida

My Commission Expires:

CAROL D. LAMONS
NOTARY PUBLIC: STATE OF FLORIDA
COMMISSION # DD205256
EXPIRES 06/15/2007
SONDED THRU 1-388-NOTARY

ACCEPTANCE BY REGISTERED AGENT

Having been named as registered agent to accept services of process for the above stated corporation at the place designated in this article, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.

Signature/Registered Agent

Date