

Division of Corporations

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Account Name : HUBCO
Account Number : 104662003400
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FLORIDA PROFTT CORPORATION OR P.A.

Custom Vinyl MJJ, Inc.

Certificate of Status	1
Certified Copy	0
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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:

Custom Vinyl MJJ, Inc.

ARTICLE II PRINCIPAL OFFICE

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

Custom Vinyl MJJ, Inc.

10290 W. Central Street

Homosassa, FL 34448

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:

Michael Johnson

10290 W. Central Street

Homosassa, FL 34448

Prepared By:

Bruce B. Hubbard

77 East John St.

Hicksville, New York 11801

1-516-935-3940

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

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

**Michael Johnson - President
10290 W. Central Street
Homosassa, FL 34448**

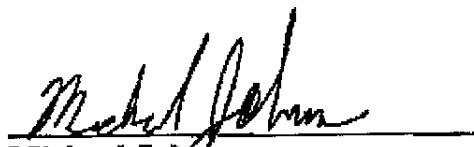
ARTICLES VI INCORPORATOR(S)

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

**Michael Johnson
10290 W. Central Street
Homosassa, FL 34448**

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

1st day of **June** 2005.


Michael Johnson - 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: **Custom Vinyl MJJ, Inc.**

2. The name and address of the registered agent and office is:

Michael Johnson

Name

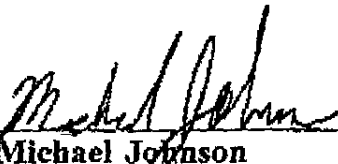
10290 W. Central Street

(P.O. Box or Mail Drop Box NOT Acceptable)

Homosassa, FL 34448

(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 obligations of my position as registered agent.


Michael Johnson
SIGNATURE

June 1, 2005

(Date)

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