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Account Name : YOUR CAPITAL CONNECTION, INC.

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Phone : (850)224~8870 Fax Number : (850)224-7047 05 JUN 10 AM 8: 09
SUBJECT OF STATE

# FLORIDA PROFIT CORPORATION OR P.A.

SUMMIT MECHANICAL SERVICES, INC.

Certificate of Status	1.
Certified Copy	1
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# ARTICLES OF INCORPORATION

- SECRETALLY OF STATE TALLAHASSEE, FLORIDA

The undersigned incorporation(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:

SUMMIT Mechanical Services, Inc.

#### ARTICLE II PRINCIPAL OFFICE

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

# 5529 Lake Leta Boulevard Tampa, Florida 33624

### ARTICLE III SHARES

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

: One Thousand (1000)

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

Craig Eugene Szenay 5529 Lake Leta Boulevard Tampa, Florida 33624

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# ARTICLE V INCORPORATOR (S)

See instructions for officers/directors

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

- 1. Craig Eugene Szenay 5529 Lake Leta Boulevard Tampa Florida 33624
- 2. Brenda Kay Szenay 5529 Lake Leta Boulevard Tampa Florida 33624

The undersigned incorporator(s) has (have) executed these Articles of Incorporation this 10th day of June, 2005.

(Signature)

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

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# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATURES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA SUBMITS THE FOLLOWING STATEMENTS IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: Summit Mechanical Services, Inc.

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

CRAIG EUGENE SZENAY
(Name)

5529 Lake Leta Boulevard (Street Address)

Tampa Florida 33624 (City, State/Zip)

Having been named as registered agent and to accept service 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 statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

(Signature)

JUNE 10, 2005

DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 323124