

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number : (850)205-0381

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

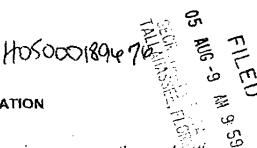
Account Number: 072450003255 : (305)634-3694 Phone Fax Number : (305)633-9696

FLORIDA PROFIT CORPORATION OR P.A.

miller restorations, inc.

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75





ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

Miller Restorations, Inc.

PRINCIPAL OFFICE

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

12200 NW 2nd Street, Coral Springs, FL 33071

ARTICLE III SHARES

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

Ten Thousand (10,000)

INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Scott M. Bender, Esq., 7446 Royal Palm Blvd., Margate, FL 33063

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

Lawrence Miller, 12200 NW 2nd Street, Coral Springs, FL 33071

OFFICERS AND DIRECTOR(S)

The initial directors (and officers, if applicable) of the corporation shall be:

Director/President: Lawrence Miller, 10160 NW 39 Court Coral Sprigns, FL 33065 Director Vice President: Bernard Orban, 12200 NW 2nd St., Coral Springs, FL 33071

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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 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 of Registered Agent

Date

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