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Florida Department of State  
Division of Corporations  
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To:  
Division of Corporations  
Fax Number : (850) 205-0381

From:  
Account Name : A 1 A CORPORATE SERVICES, INC.  
Account Number : I20010000247  
Phone : (800) 494-3124  
Fax Number : (305) 675-2811

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**FLORIDA PROFIT CORPORATION OR P.A.**  
**ADVANCED CEILING SYSTEMS, INC.**

Certificate of Status	0
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**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

**ARTICLE I NAME**

The name of the corporation shall be:

ADVANCED CEILING SYSTEMS, INC.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailing address is:

15681 SONOMA DRIVE # 104  
FORT MYERS, FL 33908

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is to engage in any activity or business permitted under the laws of the State of Florida.

**ARTICLE IV SHARES**

The number of shares of stock is:

1500 COMMON SHARES PAR VALUE \$0.01

**ARTICLE V INITIAL OFFICERS / DIRECTORS**

The name(s), address(es), and title(s) of the directors and officers:

DAVID J. ASHMAN  
President: 15681 SONOMA DRIVE # 104  
FORT MYERS, FLORIDA 33908

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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PAGE 2 ADVANCED CEILING SYSTEMS, INC.

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address of the registered agent is:

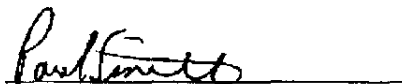
A1A REGISTERED AGENT INC.  
92 SADBERRY RD.  
QUINCY, FL 32351

**ARTICLE VII INCORPORATOR**

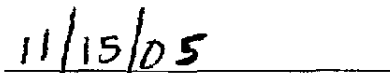
The name and Florida street address of the incorporator is:

DAVID J. ASHMAN  
15681 SONOMA DRIVE # 104  
FORT MYERS, FLORIDA 33908

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



Signature / Registered Agent



Date

  
Signature of Incorporator  
Date

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