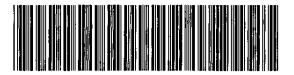
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COVER LETTER

300

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

SUBJECT: ABC Testing, Inc. (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)					
Enclosed are an orig	ginal and one (1) copy of the art	icles of incorporation and	l a check for:		
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	x \$87.50 Filing Fee, Certified Copy & Certificate o Status PY REQUIRED		
FROM:		Lawrence (Printed or typed)			
-		Jean Street Address			
	Tampa, F City	L 33615 , State & Zip			
	813-933- Daytime 1	-3838 Telephone number			

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

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:

ABC Testing, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

7522 W. Jean Street Tampa, FL 33615

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Backflow device testing

ARTICLE IV SHARES

The number of shares of stock is:

10000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

William Lawrence President 7522 W. Jean Street Tampa, FL 33615 Anne Lawrence-Parham V. P. 7522 W. Jean Street Tampa, FL 33615

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

William Lawrence 7522 W. Jean Street Tampa, FL 33615

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

William Lawrence 7522 W. Jean Street Tampa, FL 33615

Having been named as registered agent to accept service of process for the above stated 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

Signature/Registered Agent

Date

1/16/06

Date

1-16-06

Signature/Incorporator

Date