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| Certified Copies | Certificates | of Status |
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| Special Instructions to | Filing Officer: | |
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Office Use Only



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YH

(SAMPLE LETTER OF TRANSMITTAL)

DATE 9. 1. 2006

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

Re: J-JP HOME & MOLD INSPECT OF Inc.

Gentlemen:

Enclosed please find the original and one copy of the Articles of Incorporation, together with my check in the amount of \$78.75

This represents the cost of the Filing Fees, Certified Copy of Articles of Incorporation and Fee for Registered Agent Designation for the above named corporation.

Very truly yours.

JJP HOMER MOLD INSPECTIONS IN

ARTICLES OF INCORPORATION

JJP HOME & MOLD INSPECTIONS INC. (name of corporation)

ARTICLE I - CORPORATE NAME

The undersigned acting as the incorporators of a corporation under the Florida Business Corporation Act, adopt(s) the following articles of incorporation for such corporation:

| The name of the corporation is: JJP HOME MODE | D INCRECT | inde inc |
|---|-------------------------------|-----------------------------------|
| | .D 1N312C1 | IONS INC. |
| | | SEF |
| ARTICLE | II - DURATION | OF SEE |
| This corporation shall exist perpetually unless dissolved | according to Florida law. | YOF STA |
| ARTICLE | III - PURPOSE | 9: 56 |
| The corporation is organized for the purpose of engagin United States and the State of Florida. | g in any activities or busine | |
| ARTICLE IV | - CAPITAL STOCK | |
| The corporation is authorized to issue500_share | s of common stock, par val | ue \$ per share. |
| The street address of the initial principal office and, if d | | |
| STREET ADDRESS 3268 PORT CHA | KLOIJE ISA | ~V D, |
| CITY PORT CHARLOTTE | FLORIDA | ZIP 33952 |
| Mailing address, if different | | <u> </u> |
| STREET ADDRESS | | , |
| | | |
| CITY | FLORIDA | ZIP |
| ARTICLE VI - INITIAL REC | SISTERED OFFICE AND | AGENT |
| The street address of the initial registered office an | d the name of the initial r | egistered agent at the office is: |
| NAME JOHN JOKI-PESOLA | | |
| ADDRESS 3268 PORT CHARL | OTTE BLVD | |
| CITY PORT CHARLOTTE | FLORIDA | ZIP 33952 |

| NAME JOKI-PESOLA | JOH N | |
|---|--|---------------------------------------|
| ADDRESS 3268 PORTCHAR | LOTTE BLUD. | |
| CITY PORT CHARLOTTE | STATE FZORIDA | ZIP 33957 |
| NAME | | e energia |
| ADDRESS | The second secon | z |
| CITY | STATE | ZIP |
| NAME | | |
| ADDRESS | | |
| CITY | STATE | ZIP |
| The names and addresses of the incorporators signing the NAME $JOHN JOKI-PES$ | OLA | |
| | VATTE OILLA | |
| | STATE ELVD, | 7IP 7 7953 |
| ADDRESS 3268 PORT CHAR | STATE FLORIDA | ZIP 33952 |
| ADDRESS 3268 PORT CHAR CITY PORT CHARLO TTE NAME | STATE BLVD, STATE FZORIDA | ZIP 33952 |
| ADDRESS 3268 PORT CHAR | STATE FLORIDA STATE | ZIP 33952 |
| ADDRESS 32 68 PORT CHAR CITY PORT CHARLO TTE NAME ADDRESS | | · · · · · · · · · · · · · · · · · · · |
| ADDRESS 32 68 PORT CHAR CITY PORT CHARLO TTE NAME ADDRESS CITY | | · · · · · · · · · · · · · · · · · · · |

| John | ng Toki Pisola | _ (Signature) |
|------|----------------|---------------|
| | | _ (Signature) |
| ··· | | _ (Signature) |

CERTIFICATE OF DESIGNATION REGISTERED AGENT/ REGISTERED OFFICE

HE FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

06 SEP -5 PM 3: 56

JJPHOME& MOLD INSPECTIONS INC.
(name of corporation)

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted: The above corporation, organized under the laws of the State of Florida with its registered office as indicated in the Articles of Incorporation

at 3268 PORT CHARLOTTE BLVD.

PORT CHARLOTTE FLORIDA 33952

has named JOHN JOKI-PESOLA

located at the aforesaid address, as its registered agent to accept service of process within this state.

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)

9.1.2006

(Date)