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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 : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
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Fax Number : (305) 633-9696

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TALLAHASSEE, FLORIDA

FLORIDA PROFIT/NON PROFIT CORPORATION

ego carpentry, inc.

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The undersigned incorporator(s), for the purpose of forming a Profit Corporation under Chapter 607 of the Florida Statutes, hereby adopt(s) the following Articles of Incorporation.

The name of this corporation shall be: **EGO CARPENTRY, INC.**

This corporation shall commence existence upon the date of filing with the Division of Corporations, State of Florida , and shall have perpetual existence.

The principal place of business of this corporation: 4241 SW 99th COURT, MIAMI, FLORIDA 33165.

The general nature of business of this corporation is to transact any and all lawful business.

The aggregate number of shares which this corporation shall have authority to issue is 1,000 shares of common stock, having an individual par value of \$1.00.

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SEP-22-2009 12:09
EMPLOYEE

ARTICLE VI

The name and street address of the initial Registered Agent of this corporation shall be: RAYMOND VARELA, 4241 SW 99th COURT, MIAMI, FLORIDA 33165

ARTICLE VII

The name and address of the officers and board of directors shall be:

PRESIDENT

RAYMOND VARELA

4241 SW 99th COURT
MIAMI, FLORIDA 33165

ARTICLE VIII

The name and address of the Incorporator(s) to these Articles of Incorporation shall be:

EMPIRE CORPORATE KIT AMERICA, INC.
2444 NW 7TH PLACE
MIAMI, FLORIDA 33127

The undersigned has executed these Articles of Incorporation this 22nd day of SEPTEMBER, 2006.


INCORPORATOR

Ray Stormont Signing for
Empire Corporate Kit of America, Inc.

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**CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE**

EGO CARPENTRY, INC.
(NAME OF CORPORATION)

HAVING BEEN NAMED AS REGISTERED AGENT AND TO
ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED
CORPORATION AT THE PLACE DESIGNATED IN THE ARTICLES
OF INCORPORATION, 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.

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REGISTERED AGENT

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