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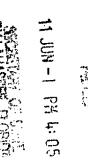
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COVER LETTER

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

_{suвлест:} White Panel Engine	ers, Inc	
(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an original and one (1) copy of the arti	cles of incorporation and	l a check for:
\$70.00 \$78.75 Filing Fee Filing Fee	\$78.75 Filing Fee	\$87.50 Filing Fee,
& Certificate of Status	& Certified Copy	Certified Copy & Certificate of Status
	ADDITIONAL CO	PPY REQUIRED
FROM: Monty Moore Name	(Printed or typed)	
3066 Lockwood St.	Address	
Port Charlotte, FL 3	3952 State & Zip	
239-273-1562 Daytime To	elephone number	
southernmoose@msi	n.com	otification)

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 N The name of the corporate	White Panel Engineers, bration shall be:	Inc.	
30	RINCIPAL OFFICE Principal street address 66 Lockwood St. rt Charlotte, F1 33952	Mailing address,	if different is:
drywall, and ac	TRPOSE the the corporation is organized is: n is organized to provide a profitable oustical ceiling industry. Our primary vice to the residential market as well	ry focus will be in the com	ne metal framing, mercial market, but
ARTICLE IV S The number of shares	HARES of stock is: 1,000 shares		
	**MITIAL OFFICERS AND/OR DIRECTOR: Monty Moore President 3066 Lockwood St Port Charlotte, FL 33952 400 shares	Name and Title:Address:	
Name and Title Address:	Bethany Moore Secretary-Treasurer 3066 Lockwood St. Port Charlotte, FL 33952 300 shares	Address:	
Name and Title Address:		Address:	
	a street address (P.O. Box NOT acceptable) of a Monty Moore President 3066 Lockwood St. Port Charlotte, FL 33952		11 JUN
	CORPORATOR So of the Incorporator is: Monty Moore President 3066 Lockwood St. Port Charlotte FL 33952		- PM 4::0
Having been named this certificate, I am fi	as registered agent to accept service of process amiliar with and accept the appointment as regis	stered agent and agree to act in thi	at the place designated in s capacity
What !	Required Signature/Registered Agent		5-24-1/ Date
I submit this docume document to the Depa	nt and affirm that the facts stated herein are t rtment of State constitutes a third degree felony	rue. I am aware that the false in as provided for in s.817.155, F.S.	
Met	Required Signature/Incorporator	OORE	5-24-1/ Date