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COVER LETTER

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

Enclosed are an original and one (1) copy of the articles of incorporation and a check for: \$70.00 **7**\$78.75 \$78.75 \$87.50 A Filing Fee Filing Fee Filing Fee Filing Fee, & Certificate of Status & Certified Copy Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED Name (Printed or typed) E-mail address: (to be used for future annual report notification)

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

ARTICLES OF INCORPORATIONIn compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE II PURPOSE The purpose for which the corporation is organized is: ACTAMONITE SPRINGS, FC ARTICLE III PURPOSE The purpose for which the corporation is organized is: DESIGN ENGINEERED PRODUCTS FOR CONISTRUCTION. SELL PRODUCTS SUCH AS: BEAMS, TRUSSES, HURRICANE STRAPPING ARTICLE IV SHARES The number of shares of stock is: ARTICLE IV INITIAL OFFICERS AND/OR DIRECTORS Name and Title: Address: ACTAMONITE SPRINGS, FC Address: ACTAMONITE SPRINGS, FC Address: ACTAMONITE SPRINGS, FC ACTAMONITE SPRINGS ACTAMONIT	ARTICLE I NAME The name of the corporation shall be: KLP SUPPLY &D	ESIGN SERVICES, INC.
The purpose for which the corporation is organized is: PRODUCTS FOR CONSTRUCTION. SELL PRODUCTS SOCH AS BEAMS, TRUSSES, HURRICANE STRAPPING ARTICLE IV SHARES The number of shares of stock is: ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS Name and Title: Address: ACTAMONITE SPRINGS FL ACTAMONITE SPRINGS F	ARTICLE II PRINCIPAL OFFICE Principal street address 606 POWELL DR.	Mailing address, if different is:
The number of shares of stock is: ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS Name and Title: TIM THY K PERRY PRE Name and Title: Address: GO POWELL BR. Address: Address: GO POWELL BR. Address: ALTAMONTE SPRINGS FC. Name and Title PRANDON PERRY QUALIA Name and Title: Address: SECRIMARY TREASURER Address: ALTAMONTE APRINGS FC. Name and Title PRANDON PERRY QUALIA Name and Title: Address: SECRIMARY TREASURER Address: ALTAMONTE APRINGS FC. ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Name: Address: ALTAMONTE APRINGS FC. ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Name: Address: ALTAMONTE APRINGS FC. ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Name: Address: ALTAMONTE APRINGS FC. BALTAMONTE APRINGS FC. Required Signature Registered agent and agree to act in this capacity Required Signature/Incorporator Required Signature/Incorporator Required Signature/Incorporator Date	The purpose for which the corporation is organized is: DESIGN PRODUCTS FOR CONISTRUCT PRODUCTS SUCH AS REAM	ENGINEERED TION, SELL S, TRUSSES, + HURRICANE
Name and Title: TIM OTHY RERRY PRES Name and Title: Address: Address: ACTAMONTE SPLINGS, FY Name and Title WISTOPHER LEE PERRY VP, Name and Title: Address: ALTAMONTE SPLINGS, FY Name and Title PRANDON PERRY QUALIA Name and Title: Address: ALTAMONTE SPLINGS, FY Name and Title PRANDON PERRY QUALIA Name and Title: Address: ACTAMONTE SPLINGS, FY ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Name: Address: ACTAMONTE SPLINGS, FY ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Name: Address: ACTAMONTE SPLINGS, FY ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Name: Address: ACC POWELL DIK ALTAMONTE SPLINGS, FY ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Name: Address: ACC POWELL DIK ALTAMONTE SPLINGS, FY ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Name: Address: ACC POWELL DIK ALTAMONTE SPLINGS, FY ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Name: Address: ACC POWELL DIK ACTIVE VII INCORPORATOR The name and address of the Incorporator is: Name: Address: ACC POWELL DIK ACTIVE VII INCORPORATOR The name and address of the Incorporator is: Name: Address: ACC POWELL DIK ACTIVE VIII INCORPORATOR The name and address of the Incorporator is: Name: Address: ACC POWELL DIK ACTIVE VIII INCORPORATOR The name and address of the Incorporator is: Name: Address: ACC POWELL DIK ACTIVE VIII INCORPORATOR The name and address of the Incorporator is: Name: ACC POWELL DIK ACTIVE VIII INCORPORATOR The name and address of the Incorporator is: Name: ACC POWELL DIK ACTIVE VIII INCORPORATOR The name and address of the Incorporator is: Name: ACC POWELL DIK ACTIVE VIII INCORPORATOR The name and address of the Incorporator is: Name: ACC POWELL DIK ACTIVE VIII INCORPORATOR The name and address of the Incorporator is: Name: ACC POWELL DIK ACTIVE VIII INCORPORATOR The name and address of the Incorporato	ARTICLE IV SHARES The number of shares of stock is:	
Address: ALTANONTE SPRINTS FL 3.701 Name and Title RANION PERRY COACLA Address: SECRAMONTE SPRINTS FL Address: SECRAMONTE SPRINTS FL Address: ACTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Name: Address: ACTICLE VII INCORPORATOR The name and address of the Incorporator is: Name: Address: ACTICLE VII INCORPORATOR The name and address of the Incorporator is: Name: Address: ACTICLE VII INCORPORATOR 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 Ball Manual Composition of State constitutes a third degree felony as provided for in s.817.155, F.S. Required Signature/Incorporator Date	Name and Title: TIM OTHY K PERRY PRES Name Address: 606 POWELL DR. Addres	
Address: SECRATATY TREAS URE Address:	Address: 606 POWELL DR. Addre	
The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Name: Address: Address: ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Name: Address:	Address: SECRATARY TREASURER Addre	and Title:
The name and address of the Incorporator is: Name: Address: Address: ALTAMONTE SPRINGS 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 Required Signature/Registered Agent I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. Required Signature/Incorporator Date	The name and Florida street address (P.O. Box NOT acceptable) of the regis Name: Address: Address:	stered agent is:
The name and address of the Incorporator is: Name: Address: Address: ALTAMONTE SPRINGS 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 Required Signature/Registered Agent I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. Required Signature/Incorporator Date	ARTICLE VII INCORPORATOR	- 077 - 777
this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity Doctor Doctor	The name and address of the Incorporator is: Name: Address: Address:	PH 1:5
Required Signature/Registered Agent I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. Required Signature/Incorporator Date		gent and agree to act in this capacity
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Required Signature/Incorporator Date	I submit this document and affirm that the facts stated herein are true. I d	
Required Signature/Incorporator Date	Tm Cm	10-13-11
		Date