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Division of Corporations  
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**FLORIDA PROFIT/NON PROFIT CORPORATION  
J FLOOR SOLUTIONS INC**

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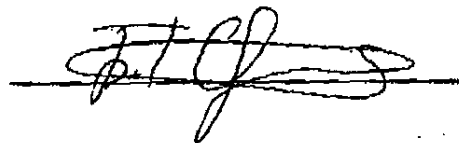
Florida Department of State

Attention: New Filings Section

To whom it may concern:

This is to advise you that the owners of 5 floor Solutions, Inc.  
of Doc# P02000100907 are the same owners of the attached  
articles of incorporation. We have dissolved the company and have no intention  
of reopening it. Thank you for your help in this matter.

Very sincerely,



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## ARTICLES OF INCORPORATION

The undersigned Incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

### ARTICLE I - NAME

The name of the corporation shall be:

J Floor Solutions Inc

### ARTICLE II - PRINCIPAL OFFICE

The principal place of business and mailing of this corporation shall be:

6995 W 12 LN  
Hialeah Fla 33014

### ARTICLE III - SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100

### ARTICLES IV - INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Joel E Jimenez  
6995 W 12 LN  
Hialeah Fla 33014

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**ARTICLE V - INCORPORATOR**

The name and address of the incorporator to these Articles of Incorporation is:

Joel E Jimenez  
6995 W 12 LN  
Hialeah Fla 33014

The undersigned incorporator has executed these Articles of Incorporation this  
\_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_\_.


  
Signature

**ARTICLE VI - DIRECTOR (S)**

The name(s) and street address (es) of the director(s) to these Articles of  
Incorporation is (are):

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

Having been named as Registered Agent and to accept service of process for the above stated corporation at 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 related to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as Registered Agent.

  
Registered Agent Signature

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