

75ree Christina Centre • 201 N. Walnut Street • Wilmington, Delaware 19801 • Telephone: (302) 575-0440 • Fax: (302) 575-1346

anufry K.

Tallahassee FL 32314

RE:

Surface Specialties Inc. P3461016SURIC

800001397958 --02/06/95---01026---998] *****70.00 *****70.00

Dear Sir or Madam:

Enclosed please find Articles of Incorporation, and our check(es) in the amount of \$70.00 for Surface Specialties Inc.

Please file at your earliest convenience and return confirmation to my attention at the address which is listed above.

Please feel free to contact me directly at 1-302-575-0440, ext. 208 with questions regarding the enclosed application.

Sincerely,

Kimberly Andras

enc.

BSB 7 1995 FEB

ARTICLES OF INCORPORATION OF

Surface Specialties Inc.

FILED CE FEB - 3 PM 3: 27

The undersigned natural person(s), of the age of 21 or more, acting to form a corporation under the corporate laws of the state of Florida do hereby certify the following:

FIRST: The name of the corporation shall be Surface Specialties Inc.

SECOND: The address of the initial registered office of the corporation is 200 - A John Knox Road, Tallahassee FL 32303-6643, County of Leon. The name of the registered agent located at said address is Larry Wolfe.

THIRD: The principal address of the corporation is 16513 Platinum Dr., Spring Hill FL 34610.

FOURTH: The purpose for which this corporation is organized shall be to engage in any lawful act or activity for which corporations may be organized under the Florida Business Corporation Act.

FIFTH: The total authorized stock of this corporation is divided into 100 shares of no par value.

SIXTH: The number of directors constituting the initial board of directors is one, and the name(s) and address(es) who will serve as directors until the first annual meeting of shareholders or until their successors are as follows:

Robert M. Ricketson Jr. 16513 Platinum Dr., Spring Hill FL 34610

SEVENTH: The duration of the corporation is perpetual.

EIGHT: This is Close Corporation.

NINTH: The name(s) and address(es) of the persons who are to act as incorporator(s) are as follows:

Kimberly Andras c/o The Company Corporation Three Christina Centre, 201 N. Walnut St., Wilmington DE 19801

We (1), the undersigned, being all the incorporators of the corporation identified above, declare that we have examined the foregoing this 26th day of January, 1995.

State of Delaware

County of New Castle

THE FOREGOING instrument was acknowledged and sworn to before me this 26th day of January, 1995 by Kimberly Andras.

Notary Public

This document was prepared by Kimberly Andras, Three Christina Centre, 201 N. Walnut Street,

Wilmington DE 19801 (302) 575-0440

SUSAN M. GRIFFIN NOTARY PUBLIC-DELAWARE Appointed October 6, 1994

Term 2 Years

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICLE FOR THE SERVICE OF PROCESS WITHIN FLORIDA, NAMING AGENT UPON PROCESS MAY BE SERVED.

In compliance with Section 607.1507, Florida Statutes, the following is submitted:

First, this Surface Specialties	Inc.
desiring to organize under the laws of the sta	te of Florida with its principal place of
business located in the city ofSpring_Hi	111 , State of ,
Florida, has named Larry Wolfe located at 2	00 - A John Knox Road, Tallahassee FL 😕
32303-6643 as its agent for service of process	within Florida.

Having been named to accept service of process for the above stated corporation, at the place designated in this Certificate, I hereby agree to act in this capacity, and I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties.

Larry Wolfe

1176/4

Date

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE (IN OR BEFORE 8/1/96: \$225 (IF DISSOLVED, MILLIMUM AMOUNT DUE TO REINSTATE: \$375.) FLORIDA DEPARTMENT OF STATE FILED PROFIT, Sandra B. Mortham CORPORATION Secretary of State 96 SEP 19 AM 10: 10 ANNUAL REPORT DIVISION OF CORPORATIONS 1996 SECRETARY OF STATE TALLAHASSEE, FLORIDA P95000010258 (8) **DOCUMENT #** SURFACE SPECIALTIES INC. Mailing Address Principal Place of Businoss 16513 PLATINUM DR SPRING HILL FL 34610 3a. Date of Last Report 3. Date incorporated or Qualified 16513 PLATINUM DR SPRING HILL FL 34610 02/03/1995 Applied For Not Applicable 9-3296586 2a. Mailing Address \$8.75 Additional 2. Principal Place of Business Suite, Apt. #, etc. 26 5. Certificate of Status Desired Foo Required \$5.00 May Be Suite, Apt. #, etc. 6. Election Campaign Financing 27 Added to Fees City & State Trust Fund Contribution 8. This corporation has liability for inter-ginle tax under a. 199.032, 22 City & State 28 Country Yes 🐼 No Zip Florida Statutes 23 Name and Address of New Registered Agent Country 30 29 9. Name and Address of Current Registered Agent 25 Ricketson 24 81 155 (P.O. 150) Mumber Is 1 (of Accessights) 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named exportation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, is an familiary with and across the obligations of, Section 607.0505, Florida Statutes. SIGNATURE SIGNATURE OFFICERS AND DIRECTORS (NOTE Registered Agent sonature and sequence with interest and sequence with interes WOLPE, LARRY Change Addition 1.2 HALF TITLE RICKETSON, ROBERT M JR 1351RT ADDRESS MAME Change Addition 16513 PLATINUM DR STREET ADDRESS 14 CUTY - JT - ZIP SPRING HILL FL 34810 2.1 TITLE DELETE CITY-ST-ZIP 2.2 NAME TITLE String NA PI 34WD 2.3 STREET ADDRESS NAJAE Change Addition 2.4 CITY - ST - ZIP STREET ADDRESS DELETE 3.1 1111.6 CITY-ST-ZIP 12141AE 400001964624 TITLE 3.3 STREET ADDRESS -10/03/96--01108gr-00 laddition 3.4. CITY - 51 - ZIP ****375.00 ****375.00 STREET ADDRESS DELETE 4.1 TITLE CITY-ST 4.2 NAME TITLE 4.3 STREET ADDRESS NAME Change Addition 4.4 CITY - ST - 71P STREET ADDRESS 5.1 TITLE DELETE CITY-ST-71P 52 NAME TITLE 53 STREET ADDRESS Change Addition NAME 5 4 CITY - ST - ZIP STREET ADDRESS 6.1 MLE DELETE 61 CITY-ST-ZIP 63 STRET ADRESS 64 CITY-ST-ZIP 14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119 07(3/W). Floric Statutes. I furnished and does not qualify for the exemption stated in Section 119 07(3/W). Floric Statutes. I do hereby certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature snail have the same legal effect as if the true certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature snail have the same legal effect as if the information indicated on this annual report or supplemental annual report or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 22 or Block 13 it shanged or on an attachment with an address. SICALATTION. CITY - ST - ZIP

SIGNING OFFICER OR DIRECTOR

SIGNATURE: