PSOOO 40024 TRANSMITTAL LETTER

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

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Enclosed is an origination:	all and one (1) copy of the articles of incorporation and aich	S y
======================================	\$78.75 Filing Fee & Certified Copy & Certified Copy & Certificate Additional Copy Required	19 M 61
FROM:	Name (printed or typed) Name (printed or typed)	32 95 HAY 2
	Address Luckenhall, Florina 33343 RDFF City, State & Zip	LED 22 AH 7:51
	(305) 637-4311 WK (Daytime Telephone number	

SUBJECT: Florion Locatres, Inc. (Proposed corporate name - must include suffix)

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

ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Bi Corporation Act, hereby adopt(s) the following Articles of Incorporation.	siness
The name of the corpor on shall be: Florion Locatons, The Dally	TILES
ARTICLE II PRINCIPAL OFFICE The principal place of business and mailing address of this corporation.	

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

4411 N.W. 18th STREET 11-203 Landerh. 11, Florion 333\$3

ARTICLE III

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

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS The name and address of the initial registered agent is:

LORDO J. SMHL 4411 N.W. 18th STREET M-203 Lauderhill, FloriDA 33313

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

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

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

/9__ day of ___ Signature Signature

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

CONTRACTOR OF THE PARTY OF

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is:	Floring LOCATORS, INC.
2. The name and address of the reg	stered agent and office is:
LORIXU 44/1/ N (P.O.B.	(NAME) (NAME)
Lewelle-hi	CONVISTATE/ZIP)

Having been named as registered agent and to accept service of process for the above stated corporation at the 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 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.

SIGNATURE) May 19, 1995
(DATE)