996000968686 Timent of State

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

SUBJECT:	TOTAL	QUALITY (Proposed corpora	MARKETIN Ite name - must include suffi	G, MC.	_	
			80	100020185 -12/03/9601 *****78.75	1684 149004 ******78.75	
Enclosed is an original and one(1) copy of the articles of incorporation and a check for :						
S70 Filing	Fee F	\$78.75 Filing Fee & Certificate	\$122.50 Filing Fee & Certified Copy	\$131.25 Filing Fee, Certified Copy & Certificate		
			ADDITIONAL CO	PY REQUIRED		
FROM: PHILIP G VOIDA Name (Printed or typed)						
3614 W. TAMPA CIR						
TAMDA FL 33629 City, State & Zip						
	813	P · 837 - 8 Daytime Teleph	45Z one number			

13/16

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 Business Corporation Act, hereby adapt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

TOTAL QUALITY MARKETING, INC.

ARTICLE II PRINCIPAL OFFICE

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

5704 N. BRANCH TAMPA FL 33607 96 DEC -2 PH 1:15

ARTICLE III SHARES

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

10,000

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

PHILIP G. VOIDA 5704 N. BRANCH TAMPAFL 33607

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):

PHILIP G. VOIDA 3614 W. TAMPA CIRCLE TAMPA FL 33614

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

27 day of November, 19 96.

(An additional article must be added if an effective date is requested.)

Signature

Signature

Notarization is not required

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

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

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 TOTAL QUALITY MARKETIM	36, INC.
2. The name and address of the registered agent and office is:	
PHILIP G. VOIDA	96 DEC SECREI
(P. O. BOX OF MAIL DTOP BOX NOT ACCEPTABLE)	C-2 PH LIARY OF HASSEE,
TAMAN KC 33629 (CHY/STATE/ZIP)	FILED 6 DEC -2 PM 1: 15 ECRETARY OF STATE LLAHASSEE. FLORIDA

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)

1/-27-9
(DATE)