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Chapter Number Only

12-19-96

Requestor's Name
Address
City State ZIP Phone

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VALIDATION ONLY

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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CORPORATION(S) NAME

Bills Painting, Inc.

REGISTERED
Toll Free: 1-800-432-3028

- Profit Amendment Merger
- NonProfit Foreign Dissolution Mark
- Limited Partnership Annual Report Other
- Reinstatement Reservation Change of Registered Agent
- Certified Copy Photo Copies Certificate Under Seal
- Call When Ready Call If Problem After 4:30
- Walk In Will Wait Pick Up Mail Order

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DIVISION OF CORPORATION

| |
|----------------|
| Name |
| Availability |
| Document |
| Examiner |
| Updater |
| Verifier |
| Acknowledgment |
| W.P. Verifier |

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION

of

Bills Painting, Inc.

(name of corporation)

The undersigned subscriber(s) to these Articles of Incorporation, natural person(s) competent to contract, hereby form a corporation under the laws of the State of Florida.

ARTICLE I - CORPORATE NAME

The name of the corporation is:

Bills Painting, Inc.

ARTICLE II - DURATION

This corporation shall exist perpetually unless dissolved according to Florida law.

ARTICLE III - PURPOSE

The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida.

ARTICLE IV - CAPITAL STOCK

The corporation is authorized to issue one hundred shares (100) of one Dollar(s) (\$ 1.00) par value Common Stock, which shall be designated "Common Shares".

ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT

The street address of the Initial Registered Agent office and the name of the Initial Registered Agent at that office is:

| | | | |
|---------|-----------------------|---------|-----------|
| NAME | Bill Walde | | |
| ADDRESS | 8843 S.W. 16th Street | | |
| CITY | Boca Raton, Florida. | FLORIDA | ZIP 33433 |

The principal office, if known, or the mailing address of the corporation is:

| | | | |
|---------|-----------------------|---------|-----------|
| NAME | Bills Painting, Inc. | | |
| ADDRESS | 8843 S.W. 16th Street | | |
| CITY | Boca Raton, | FLORIDA | ZIP 33433 |

ARTICLE VI - INITIAL BOARD OF DIRECTORS

This corporation shall have two (2) directors initially. The number of directors may be either increased or diminished from time to time by the By-Laws, but shall never be less than one (1). The names and addresses of the initial director(s) of the corporation are as follows:


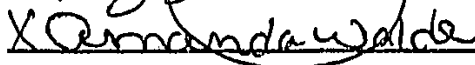
| | | | |
|---------|-----------------------|-------|--------------------|
| NAME | William G. Walde | | |
| ADDRESS | 8843 S.W. 16th Street | | |
| CITY | Boca Raton, | STATE | Florida. ZIP 33433 |
| NAME | Amanda Walde | | |
| ADDRESS | 8843 S.W. 16th Street | | |
| CITY | Boca Raton, | STATE | Florida. ZIP 33433 |
| NAME | | | |
| ADDRESS | | | |
| CITY | | STATE | ZIP |

ARTICLE VII - INCORPORATORS

The names and addresses of the incorporators signing these Articles of Incorporation are as follows:

| | | | |
|---------|-----------------------|-------|--------------------|
| NAME | William G. Walde | | |
| ADDRESS | 8843 S.W. 16th Street | | |
| CITY | Boca Raton, | STATE | Florida. ZIP 33433 |
| NAME | Amanda Walde | | |
| ADDRESS | 8843 S.W. 16th Street | | |
| CITY | Boca Raton, | STATE | Florida. ZIP 33433 |
| NAME | | | |
| ADDRESS | | | |
| CITY | | STATE | ZIP |

IN WITNESS WHEREOF, the undersigned subscriber(s) have executed these Articles of Incorporation this 19 day of Dec, 1976.

 (Seal) (H)
 (Seal) (W)
 _____ (Seal)

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**CERTIFICATE AND KNOWLEDGEMENT
OF REGISTERED AGENT**

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CERTIFICATE OF REGISTERED AGENT
OF**

Bills Painting, Inc.

(name of corporation)

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted:
The above corporation, desiring to organize under the laws of the State of Florida with
its registered office as indicated in the Articles of Incorporation

at 8843 S.W. 16th Street

Boca Raton, Florida. 33433

has named William G. Walde

located at the aforesaid address, as its Registered Agent to accept service of process within
this state.

ACKNOWLEDGEMENT

Having been named as Registered Agent to accept service of process for the above stated
corporation at the place designated in this certificate, and being familiar with the obliga-
tions of that position, I hereby accept to act in this capacity, and agree to comply with the
provisions of Florida Law in keeping open said office.



(registered agent)