

(Proposed corporate name - must include suffix)

HOUSEHOLD PLUMBING TNC.

SUBJECT:

600002077886--0 -02/05/97--01028--002 *****131.25 *****131.25 Enclosed is an original and one (1) copy of the articles of incorporation and a check for: \$70.00 \$78.75 \$122.50 X \$131.25 Filing Fee Filing Fee & Certificate Filing Fee & Certified Copy Filing Fee, Certified Copy 4 Certificate Additional Copy Required ROBERT M. EHRING FROM: Name (printed or typed) 203 ESTANCIA STREET Address င်း၊ ST. AUGUSTINE, FL. 32086

Deseins Talashaa

(904) 794-0051

Daytime Telephone number

City, State & Zip

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 adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

HOUSEHOLD PLUMBING INC.

SECRETARY OF STATEMS
DIVISION OF CORPORATIONS
91 FEB -4 AM 8: 07

ARTICLE II PRINCIPAL OFFICE

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

2642 ROSSELLE ST. JACKSONVILLE FL. 32204

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: TWO HUNDRED (200)

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

ROBERT EHRING 203 ESTANCIA STREET ST AUGUSTINE FL. 32086

ARTICLEV INCORPORATOR(5)

See instructions for efficers/directors

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

ROBERT M. EHRING

203 ESTANCIA ST. ST. AUGUSTINE FL. 32086

The undersigned incorporator(s) has(have) executed these Articles of Incorporation th			
30	day of JANUARY	, 19 <u>97</u>	
	72	Signature	**************************************
		Signature	
		Signature	-

NOTE: Affixing an efficer title after a signature of an incorporator does not constitute the designation of efficers,

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, TH 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.

2. The name and address of the regi	stered agent and office is:	
ROB	BERT EHRING (NAG)	SECRETA INISION OF
203 ESTAN	NCIA STREET	L ED RY OF CORPC
(P.O. 9	ON OF MAIL Drop BOX NOT ACCEPTABLE)	ORAL ORAL
ST. AUGUS	STINE, FL. 32086	TIENS
	(CITY/STATE/ZD)	
corporation at the place assignated agent and agree to act in this capac	agent and to accept service of process in this certificate, I hereby accept the app ity. I further agree to comply with the procession of my duties, and I am famili red agent.	pointment as registered

(SIGNATURE)

JAn 30, 1997

(DATE)