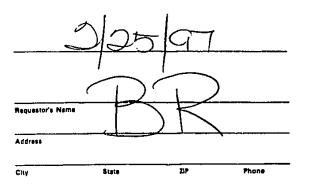
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CORPORATION(S) NAME

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Acknowledgment

W.P. Varifier

ARTICLES OF INCORPORATION FILED

of

97 FEB 26 PH 3: 13

LAING ENTERPRISES CORPORATION SECOND TALL AN AGOLE, FLORID

(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:

LAING ENTERPRISES CORPORATION

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 <u>One Thousand</u> shares (1000) of <u>Five Hundred</u>
Dollar(s) (\$ 500.00) 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	MALCOM K. LAING		
ADDRESS	6468 N.W FRIENDLY CIRCLE		
CITY	PORT St. LUCIE	FLORIDA	ZIP 34983

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

NAME	LAING	ENTERPRISES	CORPORATION	
ADDRESS	6468 N	W FRIENDLY	CIRCLE	
CITY	PORT S	t. LUCIE	FLORIDA	ZIP 34983

ARTICLE VI - INITIAL BOARD OF DIRECTORS

increased or din	ninished from time to time by the By	1 directors initially. The numb	er of directors may be either (1). The names and addresses
of the initial dir	rector(s) of the corporation are as foll	lows:	
NAME	MALCOM K. LAING		•
ADDRESS	6468 N.W FRIENDLY	CIRCLE	
CITY	PORT St. LUCIE	STATE FLORIDA	ZIP 34983
NAME			
ADDRESS			
CTTY		STATE	ZIP
NAME.			
ADDRESS			
CITY		STATE	ZIP
NAME	MALCOM K. LAING		*
	WILDOW F INTEG	· · · · · · · · · · · · · · · · · · ·	
ADDRESS	6468 N.W FRIENDLY	CIRCLE	
СПУ	PORT St. LUCIE	STATE FLORIDA	ZIP 34983
NAME			······································
ADDRESS			
CITY		STATE	ZIP
NAME			
ADDRESS			
CITY		STATE	ZIP
IN WITNESS day ofFeb	WHEREOF, the undersigned subscr cruary 1997	iber(s) have executed these Articles of I	

CERTIFICATE AND KNOWLEDGEMENT OF REGISTERED AGENT

FILED 97 FEB 26 PH 3: 13

CERTIFICATE OF REGISTERED AGENT
OF

CHAPASET L'ECRIDA

LAING	ENTERPRISES	CORPORATION
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(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

st	6468 N.W FRIENDLY CIRCLE			
	PORT St. LUCIE, FL 34983	_		
has named _	MALCOM K. LAING	_		
located at the	e aforesaid address, as its Registered Agent to accept service of process with	in		
thic etate				

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 obligations 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.

Malcoh (registered agent)