P974403

FROM: Name of corporation: POLY FACTOR, INC.
Street address of the corporation 5313 AVENAL DOUVE
City LUTZ State FL ZIP 33549
DEAR CORPORATIONS DIVISION: Please find enclosed: 1. An original Articles of incorporation and one copy for the above named corporation. 2. A certified check or money order in the amount of \$ for filling fees.
A certifled copy is is not requested. If a certifled copy is requested, the additional fee in the amount of \$ is enclosed.
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Please send responses or receipts concerning this filling to the above address.
Thank you very much.
2/n/92 Will b. War President William B. Walker Signature of incorporator (813) 949 - 1550 Telephone

ARTICLES OF INCORPORATION

of
POLY FACTOR INC.
Pursuant to Chapter 607 of the Florida Business Corporation Act, the undersigned incorporator submits these articles incorporation for the purpose of forming a for-profit corporation. Article 1. The name of the Corporation is:
Article 1. The name of the Corporation is: POLY FACTOR, INC.
Article 2. The principal place of business and malling address of this corporation is:
5313 AVENAL DRIVE, LUTZ, AL 33549
Article 3. The corporation is authorized to issue one class of stock, that being
Article 4. The name and address of the corporation's initial registered agent is: JONLE N. MENA, 9422 ROCK NOSE DRIVE, TAMPA, FL 33647
Article 5. The name and street address of the incorporator of this corporation is: WILLIAM B. WALKER, 5313 AVENAL DRIVE, LUTZ, FL 33549
Article 6. No Director shall be held liable to the corporation or its shareholders for monetary damages due to a breach of fiduciary duty, unless the breach is a result of self-dealing, intentional misconduct, or illegal actions.

In witness whereof, the undersigned incorporator has executed these Articles of incorporation on the date below. The undersigned incorporator hereby declares, under penalty of perjury, that the statements made in the forgoing Articles of incorporation are true, and that the incorporator is at least eighteen years of age.

Name of Incorporator

CERTIFICATE OF DESIGNATION OF REGISTERED OFFICE AND REGISTERED AGENT

Pursuant to section 607.0501 of The Florida Business Corporation Act, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office and registered agent, in the State of Florida.

1. The name and address of the corporation's registered agent and registered office is:	ST FEE
JONGE N. MENA	1/EU
9422 ROCK ROSE DRIVE	PIL 1: 59
TAMPA FL 33647	Dr. B
Clty/State/ZIP	

Having been named as the 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.

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Signature by registered agenc

Date of Consture