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SAULO M LACEEDA  
4744 WALDEN CIRCLE # 927  
OCLANDO, FL. 32811  
City/State/Zip

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Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)
2. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)
3. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)
4. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)

- Walk in     
  Pick up time \_\_\_\_\_     
  Certified Copy  
 Mail out     
  Will wait     
  Photocopy     
  Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

FILED  
 97 MAR -3 11:10:05  
 STATE  
 RECORDS  
 3/10/97  
 TB

Examiner's Initials	
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ARTICLES OF INCORPORATION  
OF

S & L SIDING SPECIALISTS, INC

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:

S & L SIDING SPECIALISTS, INC

ARTICLE II PRINCIPAL OFFICE

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

4744 WALDEN CIRCLE # 927  
ORLANDO, FL 32811

ARTICLE III CAPITAL STOCK

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

1000 SHARES

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

SAULO M. LACERDA  
4744 WALDEN CIRCLE # 927  
ORLANDO, FL 32811

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TALLAHASSEE  
FLORIDA

ARTICLE V INCORPORATORS

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

SAULO M. LACERDA  
4744 WALDEN CIRCLE # 927  
ORLANDO, FL 32811

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

01 day of MARCH, 1997.

Saulo M. Lacerda PRESIDENTE  
Signature/ Title

\_\_\_\_\_  
Signature/ Title

\_\_\_\_\_  
Signature/ Title

CERTIFICATE OF DESIGNATION  
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/agent, in the state of Florida.

1. The name of the corporation is: S & L SIDING SPECIALISTS, INC
2. The name and address of the registered agent and office is:  
SAULO M. LACERDA  
4744 WALDEN CIRCLE # 927  
ORLANDO, FL 32811

SIGNATURE Saulo M. Lacerda  
TITLE PRESIDENT  
DATE 03/01/97

HAVING BEEN NAMED AS REGISTERED AGENT ANT 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 POSITION AS REGISTERED AGENT.

SIGNATURE Saulo M. Lacerda  
DATE 03/01/97

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97 MAR -8 AM 10:05  
STATE OF FLORIDA