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FLORIDA DIVISION OF CORPORATIONS
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TO: DIVISION OF CORPORATIONS

FAX #: (850) 922-4001

FROM: FAS-T CORP. AGENTS, INC.
CONTACT: LIDIA FERNANDEZ
PHONE: (305) 599-0839

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FAX #: (305) 716-0346

NAME: ~~XXXXXXXXXX~~ ARCON
ELECTRICAL SUPPLY, INC.

AUDIT NUMBER.....H98000011100

DOC TYPE.....FLORIDA PROFIT CORPORATION OR P.A.

CERT. OF STATUS..1

PAGES..... 3

CERT. COPIES.....0

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FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State

June 15, 1998

FAS-T CORP. AGENTS, INC.

SUBJECT: ARPECON ELECTRICAL SUPPLY, INC.
REF: W98000013707

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The above named entity is listed as an active entity with our office; therefore, the document(s) submitted is/are not required.

If you have any further questions concerning your document, please call (850) 487-6926.

Tracy Augsburger
Document Specialist

FAX Aud. #: H98000011100
Letter Number: 898A00033263

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ARTICLES OF INCORPORATION
OF
ARCON ELECTRICAL SUPPLY, INC

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida General Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

ARCON ELECTRICAL SUPPLY, INC

The principal place of business of this corporation shall be:

8333 NW LAKE DRIVE # L-305
MIAMI, FL 33166

ARTICLE II NATURE OF BUSINESS

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States of Florida, or any other state, country, territory or nation.

ARTICLE III CAPITAL STOCK

The aggregate number of shares of stock and its par value that this corporation is authorized to have outstanding at any one time is:

10 SHARES \$ 50.00 PAR VALUE

ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE V OFFICERS DIRECTORS

The name(s) and street address(es) of the initial officer(s) and director(s), if any, who shall hold office the first year of the corporation's existence or until their successor(s) is(are) elected, is(are):

JOSE A PEREIRA
8333 NW LAKE DRIVE # L-305
MIAMI, FL 33166

Prepared by: Calixto B Plasencia
15476 NW 77th Place # 513
Miami Lakes, FL 33016
(305) 822-2255

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TALLAHASSEE FLORIDA

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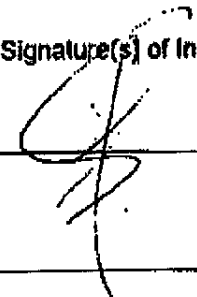
ARTICLE VI INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to this articles of incorporation is(are):

ARCON . ELECTRICAL SUPPLY, INC
Jose A. Pereira 8333 NW LAKE DRIVE # L-305
MIAMI, FL 33166

IN WITNESS WHEREOF, the undersigned incorporator(s) has(Have) executed these
Articles of Incorporation this 8 day of June 1998.

Signature(s) of Incorporator(s)



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**CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of Section 607.325, Florida Statutes, the 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.

1. The name of the corporation is
ARCON ELECTRICAL SUPPLY, INC
2. The name and address of the registered agent and office is:
JOSE A PEREIRA
8333 NW LAKE DRIVE # L-305
(P.O.BOX NOT ACCEPTABLE)
MIAMI, FL 33166

(CITY/STATE/ZIP)

SIGNATURE _____

(Corporate Officer)

TITLE _____

DATE June 8, 1998

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325, FLORIDA STATUTES.

SIGNATURE _____

DATE June 8, 1998

REGISTERED AGENT FILING FEE:

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TALLAHASSEE FLORIDA

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