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Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

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SUBJECT: VACUUM CLEANER REBUILDING CORPORATION

(Proposed corporate name - must include suffix)

Enclosed is an origin	al and one(1) copy	y of the articles of inc	orporation and a check for:
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\$70.00 Filing Fee

\$78.75 Filing Fee & Certificate

□\$122.50

\$131.25

Filing Fee

& Certified Copy

Filing Fee,

Certified Copy & Certificate

ADDITIONAL COPY REQUIRED

FROM: DON

J ZIEGENFUSS

Name (Printed or typed)

678 TRAILWOOD DRIVE

Address

ALTAMONTE SPEINGS, FL 32714

City, State & Zip

1-407-862-8179

Daytime Telephone number

98 JUL -7 AM 8: 09
SECRETARY OF STATE,

APPROVED AND FILED

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE	I	NAME
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The name of the corporation shall be:

VACUUM CLEANER REBUILDING CORPORATION

PRINCIPAL OFFICE ARTICLE II

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

678 TRAILWOOD DRIVE

ALTA MOUNTE SPRINGS, FL 32714

ARTICLE III SHARES

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

100,000

INITIAL REGISTERED AGENT AND STREET ADDRESS ARTICLE IV

The name and Florida street address of the initial registered agent are:

EUBENE BURTNETT 678 TRAILWOOD DRIVE

ALTAMONTE SPRINGS, FL 32714

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

DON ZEIGENFUSS

678 TRAIL WOOD DRIVE

ALTA MOLDTE SPRINGS , FL 32714

Signature/Incorporator

(An additional article must be added if an effective date is requested.)

Having been named as 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

Signature/Registered Agent

Date