E USE ONLY LAZARUS CORPORATE FILING SERVICE, INC. (Requestor's Name) 3320 S.W. 87th AVENUE (Address) (305)552-5973 MIAMI, FLORIDA (City, State, Zip) LOCAL REPRESENTATIVE TALLAHASSEE OFFICE USE ONLY CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known): (Document #) (Corporation Name) (Document #) (Document #) (Corporation Name) Walk in Pick up time 2100 Certified Copy Certificate of Status Photocopy Will wait Mail out AMENDMENTS NEW FILINGS Amendment Profit Resignation of R.A., Officer/Director NonProfit Change of Registered Agent Limited Liability Dissolution/Withdrawal Domestication Merger Other REGISTRATION/ OTHER FILNGS QUALIFICATION Annual Report 200 31 Hos Foreign' Fictitious Name 7 5-130 16 Limited Partnership Name Reservation Reinstatement Trademark Qther_ Examiner's Initials

ARTICLES OF INCORPORATION of

BASE STONE & MARBLE, CORPORATION

		(name of corporation	n)	
The undersig form a corpor	ned subscriber(s) to these Artic ration under the laws of the Sta	les of incorporation, n te of Florida.	atural person(s) co	mpetent to contract, hereby
The name of	the corporation is:	CLE I - CORPORAT		98 OCT - SECRETALIANA
-	BASE STO	NE & MARBLE,	CORPORATI	ON SE S
This corporat	A ion shall exist perpetually unle	RTICLE II - DURAT ss dissolved according		PH 2:1
The corporation the United States	A on is organized for the purpose ates and the State of Florida.	RTICLE III - PURPO of engaging in any ac		permitted under the laws of
Dollar(s) (\$_	on is authorized to issueon 1.00	alue Common Stock, v IAL REGISTERED Countries and the name	shares (-100- which shall be design) ofone_ gnated "Common Shares". ENT istered Agent at that office is
NAME	LUCIANO P.SOUZA			
ADDRESS				
CITY	1441 S.W. 30 Ave	STATE F	z. ZIP	33069
The principal	office, if known, or the mailing			
NAME	DACE CHONE & MAD	DI EL CORDODA	TON.	
ADDRESS	BASE STONE & MAR 1441 S.W. 30 Av	e.# 17	FION	A A A A A A A A A A A A A A A A A A A
CITY	POMPANO BEACH	CT A TE	RIDA ZIP	33069
directors may	1	INITIAL BOARD O	F DIRECTORS) directors initiately the By-Laws, but	illy. The number of
NAME	LUCIANO P. SOUZA	_ · · · · · · · · · · · · · · · · · · ·		
ADDRESS	1441 S.W. 30 Ave	.# 17		
CITY	POMPANO BEACH	CTATE	RIDA ZIP	33069
NAME				
ADDRESS,				
CITY		STATE	ZIP	
NAME	···		757.157.857.15	
ADDRESS	-			
CITY		STATE	ZIP	

Article VII - INCORPORATORS

NAME	LUCIANO P. SOUZA		-			
ADDRESS	1441 S.W. 30 Ave	e. # 17				
CITY	POMPANO BEACH	STATE	FLORIDA	ZIP	33069	
NAME	·	•				
ADDRESS						
CITY		STATE	 	ZIP		
NAME	_			ı		
ADDRESS				······································		-
CITY		STATE	, -	ZIP		
	OCTOBER	Bousa				(Seal)
						(Seal)
STATE OF	FFLORIDA).				
COUNTY	OF BROWARD	SS)		,	-	
before me, personally	a Notary Public authorized to tappeared: OULL Signature		45200	and Cour)-6g	00ve, 4/6-7
	Signature		Fo	rm of Identi	fication	
	Signature	- .	For	m of Identif	- ication	
ne that]	d known to be the person(s) who execute he— executed these ned person as indicated opposite e	articles of Incorporation	, that I relied upon th			1
NOTATRY	RUBBER STAMP SEAL	Witness my hand	and official seal in the	County, and	d State last afores	aid this
ON PU	OFFICIAL NOTARY SEAL ISRAEL B PANDO COMMISSION NUMBER CC553224 MY COMMISSION EXPIRES MAY 7,2000	Notary Signiture	thay ofOcto	pber	19 98	·····

Primed Notary Signiture

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 607.0501 or 617.0501, 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.

	The name of the corporation is: BASE STONE & MARBLE CORPORATION
	The name and address of the registered agent and office is:

	1441 S.W. 30 Ave. # 17
	(P.O. BÖX <u>NOT</u> ACCEPTABLE)
	POMPANO BEACH, FLORIDA 33069
	(CITY/STATE/ZIP)
)(Si Si Si Ri III	NG BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF CESS FOR THE ABOVE STATED CORPORATION AT THE PLACE GNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS ISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER EE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AND LIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS ISTERED AGENT.
	SIGNATURE SIGNATURE PLORIDE SIGNATURE
	DATE October 2 1998