P9900000/048

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

500002729245--9 -01/04/99--01088--010 *****78.75 *****78.75

SUBJECT:

GLASS by DESIGN, Inc.,

Enclosed is an original and one(I) copy of the articles of incorporation and a check for:

X \$78.75 P.M. Filing Fee

& Certificate of Status

EFFESTIVE DATE

From:

Robert Martinez

Name

16127 Opal Creek Dr. Address

Weston, FL 33331

City, State & Zip

954-349-8385 Daytime Telephone number 99 JAN -4 AM 8: 51
SECRETARY OF STATE
SECRETARY OF STATE
SECRETARY OF STATE

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

ARTICLES OF INCORPORATION

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

<u>ARTICLE I</u>

<u>NAME</u>

The name of the corporation shall be:

GLASS by DESIGN, Inc.,

FREETINE DATE

ARTICLE II PRINCIPAL OFFICE

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

4200 S.University Dr. Davie, FL 33328

ARTICLE III

SHARES

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

1000 (One Thousand)

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Evelyn Martinez, 16127 Opal Creek Dr. Weston, FL 33331

ARTICLE V INCORPORATOR

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

Robert Martinez, 16127 Opal Creek Dr. Weston, FL 33331

99 JAN -4 AM 8: 51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VI EFFECTIVE DATE

January 1, 1999

Signature/Incorporator

Date

12-30-98

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 die appointnient as registered agent and agree to act in this capacity. I /urther agree to comp)y witli the provisions of all statutes relating to the proper and complete peifonuance of my duties, and I am faimiliar wit/i and accept the obligations of my position as registered agent

SignaturelRegistered Agent

Date

12.30.98