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

90002750079--1 -02/01/99--01086--015 *****78.75 *****78.75

SUBJECT: SCI II	spusiki	ES, INC.	,
(Propos	ed corporate na	ame - must include suffix)	
	one (1) cor	y of the articles of incorporation	and a check
Filing Fee F	\$78.75 iling Fee ertificate	\$122.50 \$131.25 Filing Fee Filing Fee, & Certified Copy & Certificate Additional Copy Required	
FROM:		SARRICA printed or typed)	99 TALL
<u> </u>	749 PEP	PERELL DRIVE Address	99 FEB - I SECRETARY ALLAHASSE
_N,		RICHET, FL 34655 , State & Zip	PHI2:

NOTE: Please provide the original and one copy of the article

Daytime Telephone number

ARTICLES OF INCORPORATION

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:

SCI INDUSTRIES, INC.

ARTICLE II PRINCIPAL OFFICE.

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

MAILING RALICES : 11728 US HWY 19 PORT RICHEY, FL 34668

Place of business: 8316 Arcola Ave. Hudson, Fl. 34667

ARTICLE III SHARES

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

5,000.

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

ROBERT SARRICA

1849 PEPPERELL DRIVE

NEW PORT RICHEY, FL

34655

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

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

ROBERT SARRICA 1849 PEPPERELL DRIVE NEW PORT RICHET, FL 34655

BEVERLY SARRICA

1849 PEPPERELL DRIVE

NEW PORT RICHEY, FL 34655

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

day of JANUARY, 19 99

Signature

Signature

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

CERTIFICATE OF DESIGNATION OF 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/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1.	The name of the corporation is:	SCI INDUSTRIES, 1	NC.		-
2.	The name and address of the register	ered agent and office is:	_ ·		-
	ROBERT	SARRICA (NAME)	TALLAH	99 FEB	
		OFRECE DRIVE or Mail Drop Box NOT ACCEPTABLE)	TARY OF ASSEE F	-1 PM1	
	NEW PORT	RICHEY FL 34655 (CITY/STATE/ZIP)	STATE	12:13	

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)

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