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$\frac{\texttt{ARTICLES}}{\texttt{OF}} \stackrel{\texttt{OF}}{=} \frac{\texttt{INCORPORATION}}{\texttt{OF}}$

D.R.S. CARPET SERVICE, INC.

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

ARTICLE I NAME
The name of the corporation shall be:

D.R.S. CARPET SERVICE, INC.

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

2641 SW Cameo Blvd. Port St. Lucie, F1 34953

ARTICLE III CAPITAL STOCK

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

100

ARTICLE IV INITIAL REGISTERED AGENT

The name and address of the initial registered agent is:

Dennis C. Sorci 2641 SW Cameo Blvd. Port ST. Lucie, F1 34953

ARTICLE V -INCORPORATORS

| The nar | nes and address of the | person (s) sig | ming these Ar | ticles of | | | |
|---------|---------------------------------------------------------------------|-----------------|---------------|--------------------------------|-----------------------------------------------------|----------------------------|---------------------|
| Incorpo | oration are as follows: | | _ | | | | |
| Name | Dennis C. S | | | | ÷ ÷ | | |
| Addres | S 2641 SW Car | neo Blvd. | | | | • | |
| City | Port St. LUcie | State F1 | Zip 349 | 53 | | | - |
| Name | | | | | | | |
| Addres | s | | | | | _ | |
| City | | _State | Zip | | - | | |
| Name | | | | | (##. 4 % % % % % % % % % % % % % % % % % % % | ं स्थ्रालामा हा हा राज्यात | · • · · · · · |
| Addre | SS | | | | | | |
| City | | State | Zip | | | | |
| | | <u>Ja</u> | Sou | Seal) (Seal) (Seal) | ₋ | • | - : |
| | TEOF Florida NTYOF Broward | _) _ss _) _ | | | - | | |
| | ore me, a Notary Publi State and County set to Dennis C. Soro | forth above, po | | | in | ··· · · · · · · · | " <u>,</u> <u>.</u> |
| | | | | | | | |
| Art | wn to me and known icles of Incorporation, ecuted these Articles of | and who ack | nowledged be: | ecuted the for fore me that | regoing <u>He</u> | | |
| | WITNESS WHEREC | | | | | | _ |

(Notary Public, State of Florida at large)

(Notary Seal)



My Commission expires: APril 26, 2002

| B. Officers: | | | . = |
|-----------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------|
| Rresident: | Dennis C. Sorci | and the second second | 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - |
| Address: | 2641 SW Cameo Blvd. | - مید نو | |
| , . | Port ST.Lucie, F1 34953 | -+ | |
| | | | |
| Vice President: | | | = |
| Address: | | | the second of the second |
| - | | | |
| Secretary: | Dennis C. Sorci | | - |
| Address: | 2641 SW Cameo Blvd. | | |
| ridaross. | Port ST.Lucie, Fl 34953 | | |
| | | | |
| Treasurer: | | | برست خاس بست |
| Address: | · · · · · · · · · · · · · · · · · · · | | |
| | | | |
| | and the second s | - | |
| (If needed, you | may attach an addendum to the application listing | , - · · · · · · · · · · · · · · · · | |
| ` - | cers and/or directors.) | - | |
| | ····· , | | |
| 10. Name and | Street address of Florida registered agent: | | |
| | | | |
| • | Name: Dennis C. Sorci | | _ <u></u> . |
| Office A | Address: 2641 SW Cameo Blvd. | | · |
| | Port ST.Lucie, F1 34953 | | |
| | City Zip Code | • | • • • • |
| 11. Registered | l agent's acceptance: | | • |
| | | | |
| | en named as registered agent and to accept service | | |
| of process | for the above stated corporation at the place desig | nated | |
| | olication, I hereby accept the appointment as registed | | |
| and agree | to comply with the provisions of all statutes relative | e to the proper | |
| | lete performance of my duties, and I am familiar w | | |
| the obliga | tions of my position as registered agent, | | - |
| | i agent's signature: | | |
| 12. Attached | is a certificate of existence duly authenticated, not | more than | , ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |
| 90 days p | rior to delivery of this application to the Departme | ent of State, | |
| | cretary of State or other official having custody of | | |
| - | the jurisdiction under the law of which it is incor | - | |
| 13. | and Com | | |
| (Signatur | e of Chairman, Vice Chairman, or any officer liste | d in number 9 | · |
| | oplication) | A III IIMIIOOL Y | |
| • | Dennis C. Sorci, President | - | |
| | ame and capacity of person signing application) | <u> </u> | |
| . (17) | ame and capacity of person signing application) | | |

CERTIFICATE OF DESIGNATION 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 o | | | |
|----|-------------------|--------|----------|------|
| | D.R.S. | Carpet | Service, | Inc. |

2. The name and address of the registered agent and office is:

| Dennis C. Sorci | 12 . V | |
|----------------------------------------------------|----------------------|------------|
| (Name) 2641 SW Cameo Blvd. | - | |
| (P.O. Box NOT acceptable) Port St. Lucie, F1 34953 | JALL SEC | } } |
| (City/State/Zip) Signature | ECRETARY LLAHASSE |) Parisana |
| Title President | OF ST/ | COMPANY OF |
| Date 11/17/98 | TATE DRID/ | л |

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 performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Signature Signature

Date 11/17/98

REGISTERED AGENT FILING FEE: \$35.00