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CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

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ARTICLES OF INCORPORATION

OF

COMPASS HOME INSPECTION SERVICE, INC.

ARTICLE I

The name of the corporation is: COMPASS HOME INSPECTION SERVICE, INC.

ARTICLE II

The corporation may engage in any activity or business permitted under the laws of the State of Florida or the United States.

ARTICLE III

The maximum number of shares of capital stock that the corporation is authorized to issue is 1,000 shares of common stock at \$.10 par value.

ARTICLE IV

The amount of capital with which the corporation will begin business is the sum of \$100.00.

ARTICLE V

The corporation will have perpetual existence unless sooner dissolved according to law.

ARTICLE VI

The street address of the principal office of the corporation in this state shall be:

3809 Heron Ridge Lane

Weston, FL 33331

PREPARED BY; STEVEN A. FEINMAN, ESQ. 8530 STATE ROAD 84 DAVIE, FLORIDA 33324 (954)473-5424 Florida Bar No:600880

ARTICLE VII

The corporation shall have one (1) Director initially. The number of Directors may be either increased or diminished from time to time by the By-Laws but shall never be less than one. The name of the initial Director of the corporation are:

Ralph Kugel

ARTICLE VII

The name and address of the person signing these Articles of Incorporation is:

Ralph Kugel 3809 Heron Ridge Lane Weston, FL 33331

ARTICLE IX

The Registered Agent of the corporation shall be STEVEN A. FEINMAN, ESQ., whose address within this state is as follows:

8530 State Road 84 Davie, Florida 33324

IN WITNESS WHEREOF, the Articles of Incorporation have been executed on this the				
13th day of May, 1999.				
	Ralph Kugel			
Having been named Registered Agent for the above stated corporation, I hereby agree to				
accept the appointment.	STEVEN A FEINMAN, ESQ.			
STATE OF FLORIDA))SS COUNTY OF BROWARD)	- -			
I HEREBY CERTIFY, that Ralph Kugel, to me personally known or has produced _				
as identification, this day acknowledged before me that he executed the foregoing				
Articles of Incorporation, and I further certify that the said person making said acknowledgement				
to be the individual described in and who executed the said instrument.				
IN WITNESS WHEREOF, I have hereto set my hand and seal in said County and State				
on this the 13th day of May, 1999. My Commission Expires:	Notary Public, State of Florida Name Print Name Commission Number D S S S S S S S S S S S S			