

TRANSMITTAL LETTER

P9900050869

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
99 JUN - 7 AM 9:51

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

SUBJECT: OCHOA SIDING INC.
(Proposed corporate name - must include suffix)

900002891219--5
-06/01/99--01123--003
*****78.75 *****78.75

Enclosed is an original, and one (1) copy of the articles of incorporation and a check for:

\$70.00
Filing Fee

\$78.75
Filing Fee
& Certificate

\$122.80
Filing Fee
& Certified Copy

\$131.28
Filing Fee,
Certified Copy
& Certificate

Additional Copy Required

FROM: OCHOA SIDING INC
Name (printed or typed)

4012 SEABRIDGE DR
Address

ORLANDO FL 32839
City, State & Zip

407-230-0819
Daytime Telephone number

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

Articles of Incorporation

SECRETARY OF STATE
DIVISION OF CORPORATIONS
99 JUN - 1 AM 9:52

1. The name of the corporation shall be:

OCHOA SIDING INC.

2. The principal place of business and mailing address of the corporation is:

4012 SEABRIDGE DR
ORLANDO FL 32839

3. The corporation shall have the authority to issue 500 shares of stock.

4. The registered agent of the corporation is CLAXTON C. OCHOA and the registered street address is 4012 SEABRIDGE DR - ORLANDO Florida 32839.

5. The initial Board of Directors shall have 2 member(s) whose name(s) and address(es) is/are as follows:
CLAXTON C. OCHOA HUGO OCHOA
4012 SEABRIDGES DR 1204 BENNETT RD
ORLANDO FL 32839 ORLANDO FL 32803

The number of directors may be raised or lowered by amendment of the bylaws of the corporation but shall in no case be less than one.

6. The incorporator of this corporation is CLAXTON C. OCHOA whose street address is 4012 SEABRIDGE DRIVE ORLANDO FL 32839

Dated 4/10/99

X [Signature]
Incorporator 1

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 am familiar with and accept the obligations of my position as registered agent.

Dated 4/10/99

X [Signature]
Registered Agent 1