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ULUKETAKY OF STATE TALLAHASSEE, FLORIDA

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

SUBJECT: Custom Safety Equip ment, Inc.

(Proposed corporate name - must include suffix)

Enclo	osed is an	original a	nd one(1) o	copy of the	e articles of	f incorporation	n and a	check for
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570.00

□ \$78.75

Filing Fee

Filing Fee

& Certificate of Status

□\$78.75

\$87.50

Filing Fee

Filing Fee,

& Certified Copy

Certified Copy

& Certificate of

Status

ADDITIONAL COPY REQUIRED

FROM: Luis G. Bolanos

Name (Printed or typed)

4616 S.W. 142 Place

Address

Miami, Fl. 33175

City, State & Zip

305) 447-2934

AUTHORIZATION BY PHONE TO

Daytime Telephone number

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

ARTICLES OF INCORPORATION

The undersi	gned incorporate	or, for the purpose	of forming a	corporation unde	r the Florida
Busiñess Co	rporation Act, h	ereby adopts the fo	llowing Artic	les of Incorporati	on.

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ARTICLE I NAME

The name of the corporation shall be:

SECRETARY OF STATE TALLAHASSEE, FLORIDA

Custom Safety Equipment, Inc.

ARTICLE II PRINCIPAL OFFICE

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

4616 S.W. 142 Place

Miami, Fl. 33175

ARTICLE III SHARES

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

100 Shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Luis G. Bolanos

4616 S.W. 142 Place - Miami, Fl. 33175

ARTICLE V INCORPORATOR

The <u>name and address</u> of the incorporator to these Articles of Incorporation are:

Luis G. Bolanos

4616 S.W. 142 Place - Miami, Fl. 33175

Signature/Incorporator

7/14/99

(An additional article must be added if an effective date is requested.)

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/Registered Agent

Data