## MADONO C

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

\*\*\*\*\*70.00 \*\*\*\*\*70.00

SUBJECT:	DECON SEARCH, INC.
	(Proposed corporate name - must include suffix)

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

\$70.00 \$78.75 \$122.50 \$131.25 Filing Fee Filing Fee Filing Fee Filing Fee, & Certificate & Certified Copy Certified Copy & Certificate ADDITIONAL COPY REQUIRED

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

## ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be: DECOR SEARCH, INC..

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: 7700 ALTAVAN AVENUE ORLANDO, FL. 32822

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 500 Shares of Common Stock, No Par Value

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and Florida street address of the initial registered agent is: ERNESTO RODRIGUEZ 7700 ALTAVAN AVENUE ORLANDO, FL. 32822

The <u>names and address</u> of t	<i>INCORPORAT</i> the incorpora	<u>'OR</u> tor to this Article	es
of Incorporation are: ERNESTO RODRIGUEZ D/P 77 32822	700 ALTAVAN .	AVENUE ORLANDO, FI	J.
June Signature/Incorporator	<u> </u>	7/15/99 Date	
Signature/Incorporator		Date	
Signature/Incorporator	<del></del> #	Date	
Signature/Incorporator	<del></del>	Date	

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 statues 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.

gignature/Registered Agent

Date

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