TRANSMITTAL LETTER

P99000076178

Department of State Division of Corporations P. O. Box 6327

Tallahassee, FL 32314

SUBJECT:	Agua	CONTROL	SystEms	, INC.
	(Proposed corporate name 4/must include suffix)			

400002966674--6 -08/23/99--01091--008 ******70.00 ******70.00

Enclosed is an original and one(1) copy of the articles of incorporation and a check for: \$78.75 □\$78.75 \$87.50 Filing Fee Filing Fee Filing Fee Filing Fee, & Certificate of Status & Certified Copy Certified Copy & Certificate of Status ADDITIONAL COPY REOFFRED 2150 VALKARIA Rd.
Address MALABAR, FL 32950 City, State & Zip Y07-723-6630

Daytime Telephone number

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

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purp Business Corporation Act, hereby adopts th	ose of forming a corporation under the Florida ne following Articles of Incorporation.
ARTICLE I NAME	
The name of the corporation shall be:	72000
Agua CONTROL	systems, INC.

FILED

9 AUG 23 AM 9: 2

ECHETANY OF STAT

ALLAHASSEE FI ORD

ARTICLE II PRINCIPAL OFFICE

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

2150 VALKARIA Rd MALABAR, FL 32950

ARTICLE III SHARES

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

1,000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

GARY D. PORTER 2150 VALKARIA Rd MALABAR, FL 32950

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

SARY D. PORTER

2150 VALKARIARD

MALABAR FL 32950

Jany Porte

Signature/Incorporator

8/18/9 9 Date

(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

Date