

TROPICAL PROTECTION, INC.

6320 S.W. 149th Court
Miami, Florida 33193
Phone (305) 382-6799
Fax (305) 382-6822

P99 0000 98731

November 5, 1999

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

Subject: **TROPICAL PROTECTION, INC.**

To Whom It May Concern:

Enclosed are an original and one (1) copy of the articles of incorporation of Tropical Protection, Inc. and a check for \$87.50.

Please return a certified copy and a certificate of status to me at:

William Patrick Brown
6320 S.W. 149th Court
Miami, Florida 33193

Should you have any questions, please contact me at (305) 382-6799.

Sincerely,



William Patrick Brown

FILED
99 NOV -8 AM 8:35
SECRETARY OF STATE
TALLAHASSEE FLORIDA

S. Thompson NOV 10 1999

ARTICLES OF INCORPORATION

The undersigned incorporator, 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 **TROPICAL PROTECTION, INC.**

ARTICLE II PRINCIPAL OFFICE

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

6320 S.W. 149th Court
Miami, Florida 33193

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TALLAHASSEE FLORIDA

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:

William Patrick Brown
6320 S.W. 149th Court
Miami, Florida 33193

ARTICLE V INCORPORATOR

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

William Patrick Brown
6320 S.W. 149th Court
Miami, Florida 33193



Signature/Incorporator

11/5/99

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 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

11/5/99

Date