

ACCOUNT NO.: 072100000032 -REFERENCE: 476785 7197509 AUTHORIZATION: COST LIMIT : \$ 78.75 ORDER DATE: November 10, 1999 ORDER TIME: 11:17 AM ORDER NO. : 476785-005 000003041110--2 -11/10/99--01050--023 CUSTOMER NO: 7197509 *****78.75 *****78.75 CUSTOMER: Mr. Mark Burgess BURGESS & COMPANY, INC. BURGESS & COMPANY, INC. Suite 330 580 Village Boulevard West Palm Beach, FL 33409 DOMESTIC FILING NAME: PROTECTIVE COATING OF BROWARD COUNTY, INC. EFFECTIVE DATE: XX ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: CERTIFIED COPY PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING CONTACT PERSON: Janua Wilson EXAMINER'S INITIALS:

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:

Protective Coatings of Broward County, Inc.

ARTICLE II PRINCIPAL OFFICE

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

1865 S. Powerline Rd., #C Deerfield Beach, FL 33442

ARTICLE III SHARES

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

100 Shares of Common Stock with \$1.00 par value per share.

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Lionel Heroux 1711 S.W. 95th Ter. Miramar, FL 33025

ARTICLE V INCORPORATOR

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

Lionel Heroux
1865 S. Powerline Rd., #C
Deerfield Beach, FL 33442

Signature/Incorporator

11/5/55 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 agreeighted agent

Signature/Registered Agent

Date