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(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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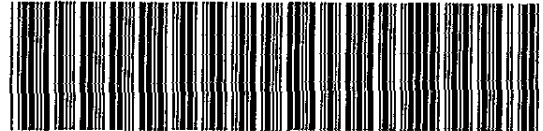
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA

J. BRYAN FEB - 4 2003

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Lee's Excavating + Trucking, Inc.
(Name of corporation must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Tim or Lara Lee
(Name of Person)
Lee's Excavating + Trucking, Inc.
(Firm/Company)
12578 - 50th St., N
(Address)
Loxahatchee, FL 33470
(City/State and Zip code)

For further information concerning this matter, please call:

Tim or Lara Lee at (561) 383-8536
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- ☒ \$70.00 Filing Fee ☒ \$78.75 Filing Fee & Certificate of Status ☐ \$78.75 Filing Fee & Certified Copy ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.*

1. Lee's Excavating + Trucking, Inc.
(Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)

2. Michigan 3. 38-3248585
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. Aug 14, 1995 5. perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. upon qualification
(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification."
(SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)

7. 17528 50th St., N Loxahatchee, FL 33470
(Principal office address)

SAME
(Current mailing address)

8. currently moved fraction of business to Florida w/ hopes of permanent move.
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)

Name: Tim Lee

Office Address: 17528 50th St. N

Loxahatchee, Florida 33470
(City) (Zip code)

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Tim Lee

(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: Tim Lee

Address: 17528 50th St, N
Loxahatchee, FL 33470

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

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UNION OF COOPERATIONS
TALLAHASSEE, FLORIDA

B. OFFICERS

President: Tim Lee

Address: 17528 50th St, N
Loxahatchee, FL 33470

Vice President: _____

Address: _____

Secretary: _____

Address: _____

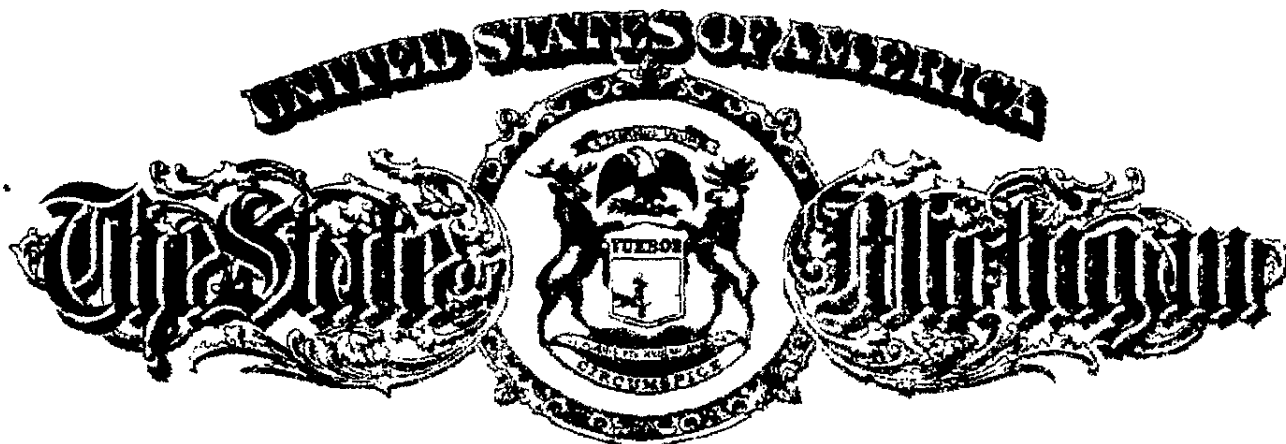
Treasurer: _____

Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. Tim Lee
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Tim Lee - President
(Typed or printed name and capacity of person signing application)



Michigan Department of Consumer and Industry Services

Lansing, Michigan

This is to Certify That

LEE'S EXCAVATING AND TRUCKING, INC.

was validly incorporated on August 15, 1995, as a Michigan profit corporation, and said corporation is validly in existence under the laws of this state.

This certificate is issued to attest to the fact that the corporation is in good standing in Michigan as of this date and is duly authorized to transact business or conduct affairs in Michigan, and for no other purpose.

This certificate is in due form, made by me as the proper officer, and is entitled to have full faith and credit given it in every court and office within the United States

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JULIUS O. CORPORATIONS
TALLAHASSEE, FLORIDA



in testimony whereof, I have hereunto set my hand, in the City of Lansing, this 29th day of January, 2003

Sent by Facsimile Transmission
702426

Andrew S. Kelly

Director

Bureau of Commercial Services