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(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
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(Bu	siness Entity Nan	ne)
(Do	cument Number)	
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Anco

192 CR 509 P.O. BOX 130 CORINTH MS 38835 PHONE: (662) 287-1494

FAX: (662) 287-1420

CONSTRUCTION, INC

LETTER OF TRANSMITTAL

TO D1140:01:	<u> </u>		10110	BASE	1.05 //	
TO: DIVISION				DATE: 8/1/2007	JOB#	
NEW FILING SECTION – CLIFTON BLDG 2661 EXECUTIVE CENTER CIRCLE				ATTENTION:		
			R CIRCLE	RE:		
TALLAHAS	SSEE, FL	32301				
OCNITI ENGLY	NAIT AT	_ ^	DINO VOLUTUE TO	N. I. OMANNO		
GENTLEMEN:			DING YOU THE FO			
COPIES	DATE	NO.		DESCRIPTION		
1			CHECK # 1691			
1			APPLICATION BY FOREIGN CORPORATION			
			<u> </u>			
						
				·		
THESE ARE TRANSMITTED AS CHECKED BELOW: FOR APPROVAL APPROVED AS SUBMITTED APPROVED AS NOTED AS REQUESTED FOR REVIEW AND COMMENT FOR BIDS DUE: PRINTS RETURNED AFTER LOAN TO US REMARKS:						
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COPY TO:						
		-		– SIGNED: Kím Bradle	1.4	
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COVER LETTER

	New Filing Section Division of Corporations				• •
STIR IF	CT: Anco Cons	truction, I	nc.		
ВОДОЕ		(Name of corpo		nclude suffix)
Dear Sir	or Madam:			•	
"Certific	losed "Application by For cate of Existence," and che business in Florida.	eign Corporation eck are submitted	n for Authorizated to register the	tion to Trans above refere	act Business in Florida," enced foreign corporation to
Please re	eturn all correspondence c	oncerning this m	atter to the foll	owing:	
Jon !	K. Harvell				
		(Nan	ne of Person)		
Anco	Construction,	Inc			
		(Firn	n/Company)		
P.O.	Box 130				
		(Address)		
<u>Corir</u>	nth, MS 38835				
•		(City/S	tate and Zip co	de)	
For furth	ner information concerning	g this matter, plea	ase call:	٠	
Kevir	n Harvell_	at (_66	62 ₎ 287	-1494	
	(Name of Person)	(A	rea Code & Da	ytime Telep	hone Number)
	STREET/COURIER AD New Filing Section Division of Corporations Clifton Building 2661 Executive Center Cit Tallahassee, FL 32301]	MAILING A New Filing S Division of C P.O. Box 633 Tallahassee,	Section Corporations 27
Enclosed	is a check for the following	ing amount:			
\$70.0		Filing Fee & ficate of Status	\$78.75 Fi	lling Fee & I Copy	\$87.50 Filing Fee, Certificate of Status & Certified Copy

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. <u>(Er</u>	iter name of co	o Construction, Inc. proporation; must include "INCORPORA prp," "Inc," "Co," or "Corp.")	TED,	" "COMPANY," "CORPORATION,"		
(If	ANCO	C. ble in Florida, enter alternate corporate	name	adopted for the purpose of transacting b	ousiness in Florida)	•
2	Mississi	opi under the law of which it is incorporated	3.	64-0502730		
(Sta	ite or country	under the law of which it is incorporated	l)	(FEI number, if applica	ble)	
4		uary 1971	_ 5.	99 Years (Duration: Year corp. will cease to ex		
	(Date	of incorporation)		(Duration: Year corp. will cease to ex	ist or "perpetual")	
6.						
_	· •			n Florida, if prior to registration) 502, F.S., to determine penalty liability)	-	
7.	192 CR	509 Corinth, MS 38834			•	
		(Principal offic	e add	ress)		•
	P.O. Box	x 130 Corinth, MS 38835				
		(Current mailir	ng add	ress)		•
8.	General	Contractor			777 38 30	
	(Purpose(s	of corporation authorized in home state	e or co	ountry to be carried out in state of Florid	a) >∺	E22 (25)
9. Na	me and stree	t address of Florida registered agent:	•	D. Box NOT acceptable)	NUG -	
	Name:	Corporation Service Compa	any		7 7 7	d reserve
Office	Address:	1201 Hays Street			PH 4 F ST FLOO	E 4 (
		Tallahassee		, Florida 32301		
		(City)		(Zip code)	··· N	
Havir design furthe	ng been name nated in this er agree to co am familiar	ent's acceptance: ed as registered agent and to accept application, I hereby accept the app omply with the provisions of all state with and accept the obligations of n orporation Service Company Y: All W All (Registered agent's signs	ointnutes r	nent as registered agent and agree to elative to the proper and complete p	act in this capac	city. I
		(Registered agent's signa	ature)			

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:	
Address:	
Vice Chairman:	
Address:	109
	7 E 6
Director:	
Address:	3 3 2
	<u> </u>
Director:	1 N
Address:	
B. OFFICERS	
President: John F. Harvell	
Address: P.O. Box 130	
Corinth, MS 38835	
Vice President: B. Tyler Harvell	
Address: P.O. Box 130	
Corinth,MS 38835	
Secretary: Jon K. Harvell	
Address: P.O. Box 130 Corinth, MS 38835	
Treasurer:	
Address:	
NOTE: If necessary, you may attach an addendum to the application listing additional office	ers and/or directors.
13. (Signature of Director or Officer listed in number 12 of the application	<u>, , , , , , , , , , , , , , , , , , , </u>
14. President	•
(Typed or printed name and capacity of person signing application)	

State of Mississippi

Office of the Secretary of State Eric Clark, Secretary of State Jackson, Mississippi

CERTIFICATE

I, ERIC CLARK, Secretary of State of the State of Mississippi, and as such, the legal custodian of the corporate records, required by the laws of Mississippi, to be filed in my office, do hereby certify:

That on October 27, 1970, the State of Mississippi issued a Charter/Certificate of Authority to:

ANCO CONSTRUCTION, INC.

That the state of incorporation is MISSISSIPPI.

That the period of duration is 99 years.

That according to the records of this office, Articles of Dissolution or a Certificate of Withdrawal have not been filed.

That according to the records of this office, a current Annual Report has been delivered to the Office of the Secretary of State.

I further certify that all fees, taxes and penalties owed to this state, as reflected in the records of the Secretary of State, have been paid and that the corporation is in existence or has authority to transact business in Mississippi.

STARY OF STAR OF FREEZ OF MISS

Given under my hand and seal of office July 9, 2007

Tric Clark

ERIC CLARK Secretary of State

Certification Number: 9206503-1 Page 1 of ! Reference: kim bradley/fs Verify this certificate online at http://www.sos.state.ms.us/busserv/corp/yerify