

F98000003456

TRANSMITTAL LETTER

To: Qualification/Tax Lien Section
Division of Corporations

SUBJECT: Concrete Solutions, 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:

Kelli Beasley

(Name of Person)

500002562985-3

-06/17/98-01071-001

*****78.75 *****78.75

Concrete Solutions, Inc.

(Firm/Company)

P. O. Box 41561

(Address)

Baton Rouge, LA 70835

(City/State/Zip)

Should you need to call someone concerning this matter, please call:

Kelli Beasley

(Name of Person)

at (504) 923-2026

(Area Code & Daytime Telephone Number)

COURIER ADDRESS:

Qualification/Tax Lien Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

MAILING ADDRESS:

Qualification/Tax Lien Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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DIVISION OF CORPORATIONS
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Concrete Solutions, Inc.

Michael L. Stevens, President

P.O. Box 41561
Baton Rouge, LA 70835

Office (504) 923-2026
Fax (504) 923-3523

Certificate of Resolution

June 16, 1998

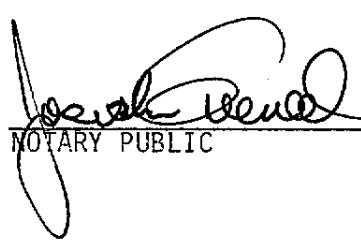
Florida Department of State
Qualification/Tax Lien Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Concrete Solutions, Inc. understands that the corporate name is not available in Florida, so we hereby adopt
CSI - JAX *Corp.*

Thanking You in Advance,



Michael L. Stevens
President



NOTARY PUBLIC

June 16, 1998
DATE

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**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. Concrete Solutions Ink.
(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. Louisiana
(State or country under the law of which it is incorporated)

3. 72-1203668
(FEI number, if applicable)

4. May 31 1991
(Date of incorporation)

5. Perpetual
(Duration: Year corp. will cease to exist or "perpetual")

6. May 1 1998
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)

7. P.O. Box 41561
Baton Rouge, LA 70835
(Current mailing address)

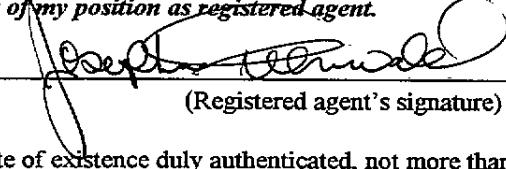
8. to enter into any other business lawful under the laws of Florida
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida) *Temporary Service - PEO*

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

Name: Joe Greenwald Atty.
Office Address: 2427 University Blvd. West
Jacksonville, Florida, 32217
(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.


(Registered agent's signature)

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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 addresses of officers and/or directors: (Street address ONLY - P.O. Box NOT acceptable)

A. DIRECTORS (Street address only - P.O. Box NOT acceptable)

Chairman: Michael C. Stevens

Address: 18311 N. Mission #1115
Baton Rouge, LA 70810

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS (Street address only - P.O. Box NOT acceptable)

President: Michael C. Stevens

Address: 18311 N. Mission #1115
Baton Rouge, LA 70810

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

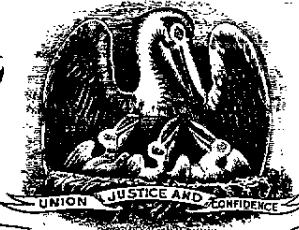
Address: _____

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

13. Michael C. Stevens
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Michael C. Stevens Pres
(Typed or printed name and capacity of person signing application)

UNITED STATES OF AMERICA
State of Louisiana



Fox McKeithen
SECRETARY OF STATE

As Secretary of State, of the State of Louisiana, I do hereby Certify that
the Articles of Incorporation of

CONCRETE SOLUTIONS, INCORPORATED

Domiciled at BATON ROUGE, LOUISIANA,

Were filed in this Office and a Certificate of Incorporation
was issued on May 31, 1991,

I further certify that no Certificate of Dissolution has
been issued.

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In testimony whereof, I have hereunto set
my hand and caused the Seal of my Office
to be affixed at the City of Baton Rouge on.

June 16, 1998

ABA 34381512D

Secretary of State

