

00 MAY -3 AM 10: 03

SEURETARY OF STATE TALLAHASSEE, FLORIDA

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

800003237478--9 -05/03/00--01003--017 *****87.50 *****87.50

SUBJECT: Elite Contractors & Development, Inc.

(Proposed corporate name – must include suffix)

Enclosed is an original and one (1) copy of the articles of incorporation and a check for:

Filing Fee & Certified Copy \$ Certificate of Status

ADDITIONAL COPY REQUIRED

FROM:		
	William Alson	
	Name (Printed or Typed) 2340 Windchime Drive	
	Address Jacksonville, FL 32224	
	City, State & Zip (904)616-2166	
	Doubling Talanham Marth	

Daytime Telephone Number

PH 5/4/00/

FILED

00 MAY -3 AM 10: 03

SLUNZTART OF STATE TALLAHASSEE, FLORIDA

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:

Elite Contractors & Development, Inc

ARTICLE II PRINCIPAL OFFICE

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

9124 Cypress Green Drive Jacksonville, FL 32256

ARTICLE III SHARES

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

500,000 Shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

William Alson 2340 Windchime Drive Jacksonville, Fl 32224

ARTICLE V INCORPORATOR

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

William Alson 2340 Windchime Drive Jacksonville Fl 32224

Signature of Incorporator

(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 as registered agent

Signature of Registered Agent

Date