TRANSMITTAL\_LETTER 817 Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314 SUBJECT: River City Monument Co. (PROPOSED CORPORATE NAME - MUST INCLUDE 52796 05/15/00--01130--009 \*\*\*\*\*87.50 \*\*\*\*\*87.50 Enclosed is an original and one(1) copy of the articles of incorporation and a check for : \$70.00 \$78.75 \$78.75 \$87.50 Filing Fee Filing Fee Filing Fee Filing Fee, & Certificate of Status & Certified Copy Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED FROM: David Blair Name (Printed or typed) 7271 Arble Drive Address Jacksonville, Florida 32210 City, State & Zip بې (904) 743-6571 Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.

A.C.

## ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

River city monument co.

<u>ARTICLE II PRINCIPAL OFFICE</u> The principal place of business/mailing address is:

1008 fountain rd. Jax,Fl 32205 <u>ARTICLE III PURPOSE</u> The purpose for which the corporation is organized is:



<u>ARTICLE IV</u> SHARES The number of shares of stock is:

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional) The name(s) and address(es):

na

<u>ARTICLE VI</u> <u>REGISTERED AGENT</u> The <u>name and Florida street address</u> of the registered agent is:

David Blair 7271 Arble Drive Jacksonville,Fl 32210

<u>ARTICLE VII</u> <u>INCORPORATOR</u> The <u>name and address</u> of the Incorporator is:

> David Blair 7271 Arble Drive Jacksonville,Fl <u>32</u>210

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I and familiar with and accept the appointment as registered agent and agree to act in this capacity

ed Agent Signature/Regist

Signature/Incorporator

5/12/00 Date

5/12/00

Date

