

P00000082137

TRANSMITTAL LETTER

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

100003373141--4  
-08/25/00--01054--014  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

SUBJECT: PARNELL Well Drilling & Underground Utilities, Inc.  
(proposed corporate name)

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

78.75  
Filing Fee  
& Certificate

FROM: Verle PARNELL  
Name

1005 CANAL ST  
Address

NEW SMYRNA BEACH FL 32168  
City, State & Zip

904-428-2757  
Daytime Telephone number

FILED  
00 AUG 25 AM 11:02  
SECRETARY OF STATE  
TALLAHASSEE, FL 32314

8-30  
KCC

**ARTICLES OF INCORPORATION**

**OF**

Parnell Well Drilling & Underground Utilities Inc.

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

**ARTICLE I NAME**

The name of the corporation shall be:

Parnell Well Drilling & Underground Utilities, Inc

**ARTICLE II PRINCIPAL OFFICE**

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

1005 CANAL ST  
New Smyrna Beach, FL 32168

**ARTICLE III SHARES**

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

100

**ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS**

The name and address of the initial registered agent is:

Joseph J. Andreano  
724 Green Rd  
New Smyrna Beach, FL  
32168

**ARTICLE V INCORPORATOR(S)**

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Verle Parnell  
1005 CANAL ST  
New Smyrna Beach, FL  
32168

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this 31<sup>ST</sup> day of AUGUST, 20 00.

Verle Parnell

Signature

Signature

Signature

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/Registered Agent

8-21-00  
Date

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00 AUG 25 AM 11:02  
SECRETARY OF STATE  
TALLAHASSEE, FL