TRANSMITTAL LETTER

SECRETARY OF STATE TALLAHASSEE, FLORIDA

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

\*\*\*\*\*78.75 \*\*\*\*\*78.75

ALL METAL STRUCTURES, INC.
(Proposed Corporate Name--Must Include Suffix)

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

\$70.00 Filing Fee Filing Fee

Сору

\_ \$131.25 Filing Fee Certified Copy & Certificate

ADDITIONAL COPY REQUIRED

LARRY BUSICK
Name (Printed or Typed)

545 TALL OAKS TER,
Address

LONGWOOD, FL. 32750 City, State & Zip

407-323-9060 Daytime Telephone Number

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

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

## ARTICLES OF INCORPORATION

The undersigned	incorporator,	for the	purpose o	f for	mina =
COLPOTOTOTI MINE	r the trorida	Business	Comoration	~ Δα+	hereby
adopts the follow	ving Articles o	f Incorpor	cation.	2200,	mereny

ARTICLE I NAME The name of the corporation shall be:
ALL METAL STRUCTURES, INC.
ARTICLE II PRINCIPAL OFFICE The principal place of business and mailing address of this corporation shall be:
545 TALL DAKS TER.
LONGWOOD, FL, 32750
ARTICLE III SHARES The number of shares of stock that this corporation is authorized to have outstanding at any one time is:
1000 COMMON - NO PAR VALUE
ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS The name and Florida street address of the initial registered agent are:
LARRY BUSICK
545 TALL OAKS TER, LONGWOOD, FL. 72750
ARTICLE V INCORPORATOR  The <u>name and address</u> of the incorporator of these Articles of Incorporation are:
LARRY BUSICK
545 TALL OAKS TER, LONGWOOD, FL, 32780
Chappy Buich
Signature/Incorporator  Date

Having been names 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

9-29-00

Date

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