

P810800059104

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

100004397481--4
-06/11/01--01099--019
*****78.75 *****78.75

SUBJECT: CRUZ EXCAVATION & CONCRETE, 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

☒ \$78.75
Filing Fee
& Certificate

☐ \$122.50
Filing Fee
& Certified Copy

☐ \$131.25
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM: MASTER TAX
Name (Printed or typed)

3846 Curry Ford Road
Address

Orlando, FL. 32806
City, State & Zip

407-896-7113
Daytime Telephone number

FILED
01 JUN 11 PM 5:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

6-13-01
WCC

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:

Cruz Excavation & Concrete, Inc.

ARTICLE II PRINCIPAL OFFICE

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

763 Hillview Drive
Altamonte Springs, FL. 32714

ARTICLE III SHARES

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

10,000 shares at a par value of \$ 1.00

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Carlos J. Cruz
763 Hillview Drive
Altamonte Springs, FL. 32714

ARTICLE V INCORPORATOR

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

Carlos J. Cruz - President
763 Hillview Drive
Altamonte Springs, FL. 32714

Signature/Incorporator

Date

(An additional article must be added if and 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/Registered Agent

Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA