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TRANSMITTAL LETTER

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

SUBJECT: Florida Construction & Rigging, Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

800004518808--5--
-08/06/01--01059--009
*****78.75 *****78.75

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 of Status

☐ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: Rennie Lawson
Name (Printed or typed)

1555 Centennial Blvd.
Address

Bartow, FL. 33830
City, State & Zip

(863) 533-8868
Daytime Telephone number

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

G. BLALOCK AUG 9 2001

ARTICLES OF INCORPORATION

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

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ARTICLE I NAME

The name of the corporation shall be:

*Florida Construction & Rigging, Inc.*SECRETARY OF STATE
TALLAHASSEE, FLORIDA**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

*1555 Centennial Blvd.
Bartow, FL 33830***ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

*To conduct all lawful business in the state of Florida***ARTICLE IV SHARES**

The number of shares of stock is:

*1,000***ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)**

The name(s) and address(es):

President*Ronnie Lawson
1555 Centennial Blvd.
Bartow FL 33830*Vice President**ARTICLE VI REGISTERED AGENT**

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

*Ronnie Lawson
1555 Centennial Blvd.
Bartow FL 33830***ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

*Ronnie Lawson
1555 Centennial Blvd.
Bartow FL 33830******
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity*Ronnie Lawson*
Signature/Registered Agent*6-15-01*
Date*Ronnie Lawson*
Signature/Incorporator*6-15-01*
Date