

PO1000078872
TRANSMITTAL LETTER
FILED

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

01 AUG -6 PM 1:08

SECRETARY OF STATE
TALLAHASSEE FLORIDA

SUBJECT: ASHTON COMMERCIAL CONSTRUCTION INC.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

300004519623--2

-08/06/01--01102--019

*****78.75 *****78.75

Enclosed are 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: PATRICK ASHTON

Name (Printed or typed)

3343 S. SALFORD BLVD

Address

NORTH PORT FL 34287

City, State & Zip

941-416-1948

Daytime Telephone number

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

2-
Day
8/10/01

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: ASHTON COMMERCIAL CONSTRUCTION INC.

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ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is: 3343 S. SALFORD BLVD
NORTH PORT, FL 33287

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Enter into the construction market for the sole purpose of revenue.

ARTICLE IV SHARES

The number of shares of stock is: 500

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

PATRICK ASHTON

3343 S. SALFORD BLVD
NORTH PORT, FL 34287

ARTICLE VI REGISTERED AGENT

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

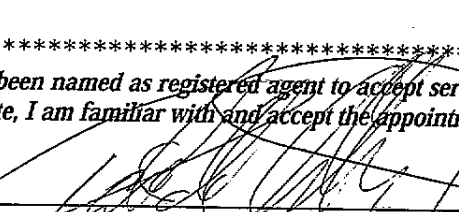
3343 S. SALFORD BLVD
NORTH PORT, FL 34287

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is: PATRICK ASHTON *

3343 S. SALFORD BLVD
NORTH PORT, FL 34287

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


Signature/Registered Agent & Incorporator*


Date

Signature/Incorporator

Date