

## TRANSMITTAL LETTER

PO1000097834

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

300004625393-3  
 -10/05/01-01071-024  
 \*\*\*\*\*87.50 \*\*\*\*\*87.50

**SUBJECT:** Sunset Contracting Corporation  
 (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 of Status

\$78.75  
 Filing Fee  
 & Certified Copy

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

**ADDITIONAL COPY REQUIRED**

FROM: Steve McKenzie  
 Name (Printed or typed)

P.O. Box 2381  
 Address

Ft. Pierce, FL 34954  
 City, State & Zip

561-370-0706  
 Daytime Telephone number

01 OCT -5 PH 1:58  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

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

T. Burch 8 2001

# 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:

Sunset Contracting Corporation

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

3206 Orange Avenue  
Ft. Pierce, FL 34947

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

For a Trucking Business, that will include hauling, Excavating,  
and trucking Contracting

## ARTICLE IV SHARES

The number of shares of stock is:

1,000

## ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

Steve McKenzie - President  
3206 Orange Avenue  
Ft. Pierce, FL 34947

## ARTICLE VI REGISTERED AGENT

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

Steve McKenzie  
3206 Orange Avenue  
Ft. Pierce, FL 34947

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Steve McKenzie  
3206 Orange Avenue  
Ft. Pierce, FL 34947

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

John M. Lynn  
Signature/Registered Agent

9/19/01

Date

John M. Lynn  
Signature/Incorporator

9/19/01

Date

01 OCT - 5 PM 1:58

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED