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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 205-0381

From:

Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305) 634-3694
Fax Number : (305) 633-9696

FLORIDA PROFIT CORPORATION OR P.A.

SIMPSON DEVELOPER'S INC.

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$78.75

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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:

*SIMPSON DEVELOPER'S INC.***ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

*210 NW 15th Street
Pompano Beach, Florida 33060***ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

*General Contractor, perform work in the Construction Industry.***ARTICLE IV SHARES**The number of shares of stock is: *100 Total***ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)**

The name(s) and address(es):

*Gail N. SIMPSON
210 NW 15th Street
Pompano Beach, Florida 33060***ARTICLE VI REGISTERED AGENT**The name and Florida street address of the registered agent is:*Darryl G. Simpson
210 NW 15th Street
Pompano Beach, Florida 33060***ARTICLE VII INCORPORATOR**The name and address of the incorporator is:*Darryl G. SIMPSON
210 NW 15th Street
Pompano Beach, Fla. 33060*

 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


 Date


 Signature/Incorporator


 Date

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