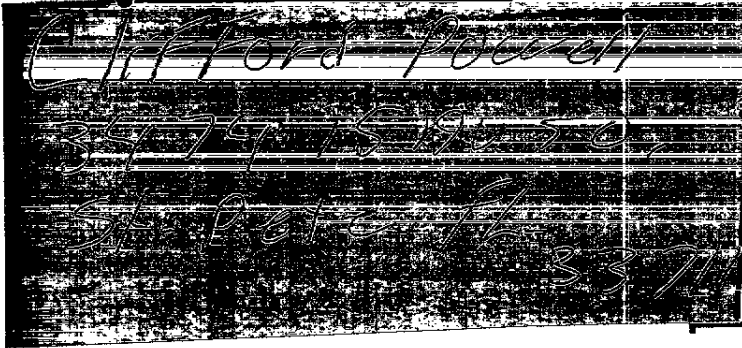


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Office Use Only

**CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):**

1. \_\_\_\_\_  
(Corporation Name) (Document #)
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3. \_\_\_\_\_  
(Corporation Name) (Document #)
4. \_\_\_\_\_  
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02 MAR 25 AM 11:56

- ☐ Walk in      ☐ Pick up time \_\_\_\_\_      ☐ Certified Copy  
☐ Mail out      ☐ Will wait      ☐ Photocopy      ☐ Certificate of Status

**NEW FILINGS**

- ☐ Profit  
☐ Not for Profit  
☐ Limited Liability  
☐ Domestication  
☐ Other

**AMENDMENTS**

- ☐ Amendment  
☐ Resignation of R.A., Officer/Director  
☐ Change of Registered Agent  
☐ Dissolution/Withdrawal  
☐ Merger

**OTHER FILINGS**

- ☐ Annual Report  
☐ Fictitious Name

**REGISTRATION/QUALIFICATION**

- ☐ Foreign  
☐ Limited Partnership  
☐ Reinstatement  
☐ Trademark  
☐ Other

Examiner's Initials

3-25-02  
78-2-2  
WC



FLORIDA DEPARTMENT OF STATE

Katherine Harris  
Secretary of State

March 15, 2002

CLIFFORD POWELL  
3474 15TH AVE. SOUTH  
ST. PETE, FL 33711

SUBJECT: C & C MASONRY, INC.  
Ref. Number: W02000007223

We have received your document for C & C MASONRY, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

**Adding "of Florida" or "Florida" to the end of a name is not acceptable.**

The effective date is not acceptable since it is not within five working days of the date of receipt.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6995.

Wanda Cunningham  
Document Specialist  
New Filing Section

Letter Number: 702A00015533

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
02 MAR 25 AM 11:57

(Do not write in this space)

ARTICLES OF INCORPORATION  
FOR DOMESTIC PROFIT

Pursuant to the provisions of the Codes of Corporations for the State of FLORIDA, the undersigned as the duly authorized and acting, Chief Executive Officer, President, Secretary, Treasurer, Superintendent or Registered Agent in the State of FLORIDA, of the corporation named below for which this statement is submitted, under oath hereby state:

ARTICLE I

The name of the corporation shall be: C & C MASONRY SPECIALIST, INC.

ARTICLE II

The name and street address of the Registered Agent is: -

CLIFFORD POWELL	254-94-5203	3474 15TH AVE S	ST PETERSBURG	FL	33711-	(727) 321-2734
Name	SS#	Street	City	State	ZipCode	Telephone

The Registered Agent is appointed by: CLIFFORD POWER, PRESIDENT

Name and Title of Officer of Corporation

ARTICLE III

The principle place of business of this corporation shall be:

3474 15TH AVE S		ST PETERSBURG	FL	33711-
Street	Apt #	City	State	ZipCode

The mailing address of this corporation shall be: -

3474 15TH AVE SO		ST PETERSBURG	FL	33711-
Street	Apt #	City	State	ZipCode

The County in which the principle place of business of this corporation is located in is: PINELLAS

ARTICLE IV

Indicate type of Corporation  
(CHECK ONE)

<input checked="" type="checkbox"/> BUSINESS STOCK	<input type="checkbox"/> COOPERATIVE	<input type="checkbox"/> PROFESSIONAL
<input type="checkbox"/> BUSINESS NONSTOCK	<input type="checkbox"/> PUBLIC BENEFIT	<input type="checkbox"/> INSURANCE
<input type="checkbox"/> BUSINESS STATUTORY CLOSE	<input type="checkbox"/> MANAGEMENT	<input type="checkbox"/> RELIGIOUS

ARTICLE V

The purpose for which this corporation is organized shall be: \_\_\_\_\_  
TO CONTRACT CONCRETE SLAB AND MASONRY WORK AND ANY OTHER LEGAL PURPOSE  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

ARTICLE VI

The starting date of the corporation shall be: 03/01/02  
The Fiscal year of the corporation shall end on the last day of the month of December

ARTICLE VII

Is the corporation to exist perpetually? ☒ Yes ☐ No  
Tax Closing Date if known: 12/31/02

ARTICLE VIII

The aggregated number of shares which the corporation is authorized to issue is: \$1,000  
The corporation will not commence business until consideration of the value of at least One Thousand Dollars (\$1,000.00) consisting of money, labor done or property has been actually recieved for the issuance of shares.

The names of all shareholders, and the # of shares of stock that this corporation is authorized to have outstanding at any one time is:

NAME	CLASS	PAR VALUE PER SHARE	NUMBER OF SHARES AUTHORIZED	NUMBER OF SHARES PROPOSED TO BE ISSUED	CONSIDERATION TO BE RECEIVED THEREFOR
CLIFFORD POWELL	COMMON	1.00	1000	100	100.

State any designations, powers, preferences, rights, qualifications, limitations, or restrictions applicable to any class of stock or any special grant of authority to be given to the board of directors:

NONE

State provisions limiting or denying to shareholders the Preemptive Right to acquire additional shares of the Corporation. (If none so state).

NO LIMITS

Meeting of the shareholders    shall X shall not be held outside the state of FLORIDA

#### ARTICLE IX

The number of Directors or Officers constituting the initial Board of Directors of the corporation is   1  

The names and street addresses of the members of the Board of Directors, or Officers of the Corporation are:

NAME	TITLE	NUMBER AND STREET	CITY	STATE	ZIPCODE
CLIFFORD POWELL	PRESIDENT	3747 15TH AVE SO	ST PETERSBURG	FL	33711-

The Board of Directors or Officers of the Corporation is not authorized to increase or decrease the number of Directors or Officers. If so authorized the minimum number, if any, shall be   1   Directors or Officers, and the maximum number, if any, shall be   3   Directors or Officers.

The initial Board of Directors shall serve as Directors until the First Annual Meeting of the Shareholders or until their successors are duly elected and qualified as provided in the By-Laws.

All powers and authority of the corporation shall be vested in and may be exercised by the Board of Directors except as otherwise provided by law, these Articles of Incorporation, or the By-Laws of the Corporation.

ARTICLE X

The name, social security number and street addresses of the incorporator(s) to these Articles of Incorporation are:

NAME	SS #	NUMBER AND STREET	CITY	STATE	ZIP CODE
CLIFFORD POWELL	254-94-5203	3747 15TH AVE SO	ST PETERSBURG	FL	33711-

The name and address of any foreign or alien affliant(if none so state)

NAME	NUMBER AND STREET	CITY	STATE	ZIP CODE
NONE				

State the provisions for the regulation of the internal affairs of the corporation.  
BY SHAREHOLDERS

Will the corporation have members? X Yes    No

ARTICLE XI

The value of assets of the corporation are as follows: \$100.00

The liabilities thereof are \$100.00. The assets and liabilities indicated are as of a date within six months prior to filing these Articles of Incorporation.

The maximum amount of capital such corporation intends to invest in the state at any time during the current Fiscal Year is \$1.00.

The distribution of assets on Dissolution or Final Liquidation will be as follows:  
TO SHAREHOLDERS OF RECORD

STATEMENT OF STANDARD INDUSTRIAL CODE (SIC)

The Standard Industrial Code(s) (SIC) which most closely describe the initial activities of the corporation are:

PRIMARY 99999 SECONDARY 99999 OTHER 99999

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this 5<sup>th</sup> day of March, 2002

Clifford L. Powell  
Name

President  
Title

Name

Title

Name

Title

(CORPORATE SEAL)

On the date above written, Clifford L. Powell, signed these Articles of Incorporation in our presence, and at his/her/their request we now sign these Articles of Incorporation as witnesses in each other's presence.

WITNESS:

John Schaub

WITNESS:

State of FLORIDA

County of PINELLAS

Before me, a notary public in and for said county and state, personally appeared Clifford L. Powell who is known to me to be the same persons who executed the foregoing Articles of Incorporation and duly acknowledged the execution of the same, as well as John Schaub and \_\_\_\_\_ who witnessed the signing of the foregoing Articles of Incorporation. In witness whereof, I have hereunto subscribed my name and affixed my official seal, this 5<sup>th</sup> day of March A.D. 2002

(notary seal)

Maryann E. Schaub 3/5/02  
Notary Public

Name:

Commission No.:

My Commission Expires

Maryann E. Schaub  
Commission # CC 918160  
Expires April 19, 2004  
Bonded Thru  
Atlantic Bonding Co., Inc.

This Document was prepared By:

THE ACCOUNTING OFFICE

Name

5580 PARK BLVD. #5

PINELLAS PARK, FL 33781

Address

City

State

ZipCode

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
02 MAR 25 AM 11:57

CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF THE STATUTES FOR THE STATE OF FLORIDA, THE  
UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA,  
SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT,  
IN THE STATE OF FLORIDA.

1. The name of the corporation is: C & C MASONRY SPECIALIST, INC.
2. The name and address of the registered agent and office is:  
CLIFFORD POWELL  
3474 15TH AVE S  
ST PETERSBURG, FL 33711-

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.

Clifford L. Powell      3-5-02  
Signature      Date

State of FLORIDA )  
County of PINELLAS )

Before me, a notary public in and for said county and state, personally appeared \_\_\_\_\_  
who are known to me to be the same person who executed the Certificate of Designation of Registered  
Agent/Registered Office are duly acknowledged the execution of the same. In witness whereof, I have hereunto  
subscribed my name and affixed my official seal, this 5th day of March, A.D. 2002.

(notary seal)

Maryann E. Schaub 3/5/02  
Notary Public  
Name: \_\_\_\_\_  
Commission No.: \_\_\_\_\_  
My Commission Expires: \_\_\_\_\_

Maryann E. Schaub  
Commission # CC 918160  
Expires April 19, 2004  
Bonded Thru  
Atlantic Bonding Co., Inc.

