02 JUN 26 AM 9: 43

Department of State Division of Corporations P O Box 6327

EFFECTIVE DATE

SECRETARY OF STATE TALLAHASSEE FLORIDA

Tallahassee, FL 323	$\frac{7-7-67}{2}$			
SUBJECT:	MARTINEZ CONC	RETE CO TE NAME – <u>MUST INCL</u>	90006 -06/26 ***** UDE SUFFIX)	049509 70201078001 78.75 *****78.75
Enclosed is an origin	al and one(1) copy of the artic	les of incorporation and	a check for :	
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	S87.50 Filing Fee, Certified Copy & Certificate of Status DPY REQUIRED	
FROM:				. — <u>—                                  </u>
	Name (F 25415 SW 128 Ave	rinted or typed)		<del></del> .
	Homestead, Fl 33	Address 032		
	City,	State & Zip		· ,

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

Daytime Telephone number

(305) 257-4738

FILED

## ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (PROFIT) 6 AM 9: 43

ARTICLE I NAME

SECRETARY OF STATE TALLAHASSEE FLORIDA

MARTINEZ CONCRETE CO

ARTICLE II PRINCIPAL OFFICE
Principal place of business/mailing address is:

25415 SW 128 AVE HOMESTEAD, FL 33032

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

CONCRETE PUMPING SERVICES

ARTICLE IV SHARES

100 SHARES OF STOCK AT \$1.00 Par Value

ARTICLE V INITIAL OFFICERS/DIRECTORS

The name(s) and address(es):

YONI O MARTINEZ 25415 SW 128 AVE HOMESTEAD, FL 33032

ARTICLE VI REGISTERED AGENT
The name and Florida street address of registered agent are:

YONI O MARTINEZ 25415 SW 128 AVE HOMESTEAD, FL 33032

The name and address of the Incorporator are:

FILED

02 JUN 25 AM 9: 43

SECRETARY OF STATE FALLAHASSEE FLORIDA

YONI O MARTINEZ 25415 SW 128 AV HOMESTEAD, FL 33032

ARTICLE VIII

## EFFECTIVE DATE

The effective date of this Corporation shall be JULY 1, 2002

Having being 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.

Signature /Registered Agent YONI O MARTINEZ

Date

Signature /Incorporator YONI O MARTINEZ

Date

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