## PO 2 OF STATE OF STAT

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

SUBJECT:	PROPOSED CORPORA	SON I	DE SUFFIX)	<u></u> 그
Enclosed is an original	al and one(1) copy of the article	es 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	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	
FROM:	Russell A. W	1ckeither [1]	00006137 -07/02/020 ******87.50	6000 1003001 *****87.50
	915 Bloxha	am Cutoff	Rd	a
15.	Crawford vill	tate & Zip	2327	
CELVED 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	850- \$75 Daytime Tel	ephone number	<del></del>	ر در

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

Day 1, lor

ARTICLES OF INCORPORATION FILED				
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)  SECRETARY OF STATE DIVISION OF CORPORATIONS				
ARTICLE I NAME  O2 JUL - I PM 3: 50				
The name of the corporation shall be: Bob McKeithen + Sons Inc				
ARTICLE II PRINCIPAL OFFICE				
The principal place of business/mailing address is: 412 Crossway Rd				
Tallahassee Fl. 32305				
· -				
ARTICLE III PURPOSE  The purpose for which the corporation is organized is: Rooting & Constucation				
The purpose for which the corporation is organized is: Wooting 4 Constunction				
ARTICLE IV SHARES The number of shares of stock is: 1000 Common				
APTICLE II INVENTAL OPPLOTES				
ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)  The name(s) address(es) and title(s): \( \lambda \)				
The name(s), address(es) and title(s). Robert A. McKeithen, P.O. Box 910				
Crawfordville, Fl. 32326, President				
10-35 11 1. I'll their thew, 415 Blox ham Cutoff RD				
Crawfordville, Fl. 32327, Vice-President				
The name and Florida street address of the registered agent is: Rossell A. Mc Keither.				
915 Bloxham Cutoff Rd. Crawfordville +1.				
32327				
ARTICLE VII INCORPORATOR				
The name and address of the Incorporator is: Russell A. Mckeither.				
915 Bloxham CutoFf Rd. Crawfordville Fl. 32327				
Tis stox nam Conord Rd. Craw Fordu, 11e Pl. 5232/				
**************************************				
Having been named as registered agent to accept service of process for the above stated corporation at the place design at the				
certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity				
(KXW = V iiV)				
Signature/Registered Agent  Date				
O M 2.4 Date				
KAMallathul 7-6-2002				
Signature/Incorporator Date				

Date

**\$**,