## P02000081554 TRANSMITTAL LETTER

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

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SUBJECT: BUDGES EXCAVATION LIPE,

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an orig	rinal and one (1) copy of the artic	eles of incorporation and	l a check for:	1	
\$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	02.	SECI
FROM:	FROM: //neent Lopez Name (Printed or typed)  So 41 17 th 57 Address			JUL 26 AH 9: 12	FILED STATE AHASSEE, FLORID
7-16hyh.//5 Fly. 33548  City, State & Zip  Daytime Telephone number					

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

•ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Pro	ofit) & FLE
ARTICLE I NAME The name of the corporation shall be: Buddles execuating I	ofit)  OR JUL 26 AM 9: 12
ARTICLE II PRINCIPAL OFFICE  The principal place of business/mailing address is:  504117+45+  20144415 Fla 33540  ARTICLE III PURPOSE  The purpose for which the corporation is-organized is:	3: 12
ARTICLE IV SHARES The number of shares of stockis: authorized to be -	issued & outstanding at any
ARTICLE V INITIAL OFFICERS/DIRECTORS (or The name(s), address(es) and title(s):	President & Alice ton
ARTICLE VI REGISTERED AGENT  The name and Florida street address of the registered agent is  VINCINI SUPPLY  SOURCE VILLE INCORPORATION	
The name and address of the Incorporator is:  Vineint Jeprz  504117155+ Zephyklills	
**************************************	above stated corporation at the place designated in this
Signature/Registered Agent	7/23/07
Signature/Incorporator	√Date -