PO2000130584

(Requ	uestor's Name)	
(Addı	ress)	
•	·	
(Addı	ess)	
(City/	State/Zip/Phone	; #)
PICK-UP	WAIT	MAIL.
	÷	
(Busi	ness Entity Nan	ne)
(Door	ument Number)	
1000	intent (valuaei)	
Certified Copies	Certificates	of Status
Special Instructions to Fi	ling Officer:	
		į

Office Use Only



200009367222

12/11/02--01049--008 **78.75

PILED

02 DEC 11 AM 10: 47

SECRETARY OF STATE
SECRETARY OF STATE

8/3/1

TRANSMITTAL LETTER

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

SUBJECT: <u>S</u>	IKE + R. CONSTR	uction, Inc.	
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u> I	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation and	l a check for:
\$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	& Certificate of Status
FROM:	VINCENT MONG	ADDITIONAL CO	PY REQUIRED
-	790 AIRPORT RO	A D Address	
	NEW SMYRNA BE	ACH FL 32/6 State & Zip	8
•	386 - 428 - 481	Fo	

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. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

SPIKE + R. CONSTRUCTION, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

790 AIR PORT ROAD NEW SMYRNA BEACH, FL 32168

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

GENERAL CONSTRUCTION

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

VINCENT MONCATO PRESIDENT 790 AIRPORT ROAD NEW SMYRNA BEACH FL 32168

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

VINCENT MONGATO 190 AIRPORT ROAD NEW SMYRNA BEACH FL 32168

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

VINCENT MONGATO 740 AIRPORT ROAD NEW SMYRNA BEACH FL 32168

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

12-9-02

Date

12-9-02

Signature/Incorporator

Date

SECRETARY OF STATE