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(Requestor's Name)				
(Address)				
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(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Business Entity Name)				
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Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
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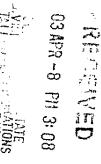
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TRANSMITTAL LETTER

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

SUBJECT: A	RMOUR CONSTA	RUCTION IN	je,
	(PROPOSED CORPORATE I		
\$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL COI	\$87.50 Filing Fee, Certified Copy & Certificate of Status
	JOHN ARMO	inted or typed)	
	JACKSON VICLE City, S	FL 322 State & Zip	21

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

ARTICLE I NAME		
The name of the corporation shall be: ARMOUR CO	INSTRUCTION,	Inc.
ARTICLE II PRINCIPAL OFFICE		
The principal place of business/mailing address is:	·	
1615 JARRARD WAY JACKSON	VILLE FC	3222)
ARTICLE III PURPOSE		-
The purpose for which the corporation is organized is:		
Construction		
ARTICLE IV SHARES		Q: D
The number of shares of stock is: 100	•	SEC SEC
, -		2 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
ARTICLE V INITIAL OFFICERS/DIRECTORS (opt	ional)	00 ORF
The name(s), address(es) and title(s):		R Popular
		3: 3:
		5 S
ARTICLE VI REGISTERED AGENT		
ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is:		
LISA ARMOUR		
· · · · · · · · · · · · · · · · · · ·	<u>-</u>	
1615 JARRARD WAY JACKSONUTCHE	- FC322	2
ARTICLE VII INCORPORATOR		
The <u>name and address</u> of the Incorporator is:		
JOHN ARMOUR		
1615 JARRARD WAY JACKSONUTCHE	FC 33331	

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

Signature/Incorporator