

Florida Department of State

Division of Corporations Public Access System

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Division of Corporations

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From:

Account Name : FISHER & SAULS, P.A. /30

Account Number : 076666001271 Phone

: (727)822-2033

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Mil

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FLORIDA PROFIT CORPORATION OR P.A.

MASONRY MOVERS, INC.

| Certificate of Status | 0 |
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| Certified Copy | 0 |
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ARTICLES OF INCORPORATION

OF

MASONRY MOVERS, INC.

ARTICLE I

The name of this corporation shall be MASONRY MOVERS,

ARTICLE II

The duration of this corporation shall be perpetual.

ARTICLE III

This corporation is organized for the purpose of conducting any and all legal business.

ARTICLE IV

This corporation is authorized to issue 1,000 shares of One Cent par value common stock which shall be designated common shares.

ARTICLE V

Every shareholder, upon the sale for cash of any new stock in this corporation of the same kind, class or series of that which he already holds, shall have the right to purchase his pro rata share (as nearly as may be done without the issuance of fractional shares) at the time at which it is offered to others.

ARTICLE VI

The street address of the initial registered office of this corporation is 416 S.E. Cortez Avenue, Stuart, FL 34994, and the name of the initial registered agent of this corporation at that address is Jordan Fields.

MAY-23-2003 09:14

ARTICLE VII

This corporation shall have one (1) director initially. The name and address of the director is as follows:

KIM BROWNIE 175 Boyd Road Fort Pierce, FL 34945

ARTICLE VIII

The name and address of the person signing these Articles of Incorporation is: JORDAN FIELDS, 416 S.E. Cortez Avenue, Stuart, FL 34994

ARTICLE IX

The mailing address of this corporation is: 416 S.E. Cortez Avenue, Stuart, FL 34994

ARTICLE X

The corporation reserves the right to amend or repeal any provision contained in these Articles of Incorporation, or any amendment to them, and any right to them and any right conferred upon the shareholders is subject to this reservation.

IN WITNESS WHEREOF, the undersigned subscriber has executed these Articles of Incorporation, hereby declaring and certifying that the facts herein stated are true on this details of May, 2003.

| | I hereby understand and accept to Position as Registered Agent | he |
|------------------|--|----|
| STATE OF FLORIDA |) | |
| COUNTY OF MARTIN |) | |

known or who furnished known to me) as identification, described as Incorporator and Registered Agent in the foregoing Articles of Incorporation, who acknowledged to and before me that he executed said Articles of Incorporation and who did take an oath.

WITNESS my hand and seal this 2/ day of May, 2003.

(SEAL)

Yvonne M. Kochler

MY COMMISSION # DD033871 EXPIRES

September 29, 2005

BONDED THRU TROY FAIN INSURANCE, INC.

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SLUBBLANCE OF STATE TALLAHASSEE, FLORIDA

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