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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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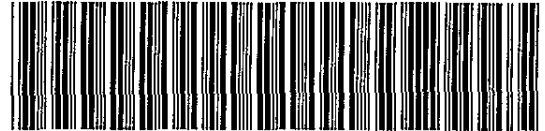
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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09/08/03--01045--006 **70.00

03 SEP -8 PM 2:05
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

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

SUBJECT: KEY LARGO SANDBLASTING, INC.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☒ \$70.00
Filing Fee

☐ \$78.75
Filing Fee
& Certificate of Status

☐ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: DONNA SACCO

Name (Printed or typed)

C/O BERNARD DODDO 5725 SW 112 TERRACE

Address

COOPER CITY, FLORIDA 33330

City, State & Zip

954-680-4818

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. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

KEY LARGO SANDBLASTING, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

402 MAHOGANY CIRCLE
KEY LARGO, FL 33037

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO ENGAGE IN ANY BUSINESS, ACTIVITY OR ENDEAVOR WHICH IS LAWFUL UNDER
THE LAWS OF THE STATE OF FLORIDA.

ARTICLE IV SHARES

The number of shares of stock is:

(ONE THOUSAND) 1000 SHARES

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

ROBERT LAIRD P/V/P/T/S/D
402 MAHOGANY CIRCLE
KEY LARGO, FL 33037

ARTICLE VI REGISTERED AGENT

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

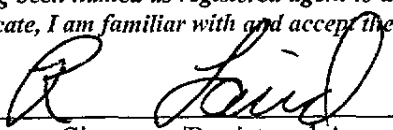
ROBERT LAIRD
402 MAHOGANY CIRCLE
KEY LARGO, FL 33037

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

DONNA SACCO
C/O BERNARD DODDO 5725 SW 112 TERRACE
COOPER CITY, FLORIDA 33330

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

9-4-03

Date



Signature/Incorporator

9-4-03

Date

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
03 SEP - 8 PM 2:05