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Florida Department of State

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## FLORIDA PROFIT CORPORATION OR P.A.

Stone Masters Masonry Inc.

Certificate of Status	1
Certified Copy	0
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#### ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE\_I\_ NAME

The name of the corporation shall be:

Stone Masters Masonry Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

Stone Masters Masonry Inc.

1001 Lake Helen-Osteen Road Lake Helen, FL 32744

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

1,500 Shares at No Par Value

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Mark Collins 1001 Lake Helen-Osteen Road Lake Helen, FL 32744 03 OCT 23 AM IO: 35
SECRETARY OF STATE
AND ASSEE, FLORIDA

Prepared By:
Bruce B. Hubbard
77 East John St.
Hicksville, New York 11801
1-516-935-3940

### ARTICLES V INITIAL OFFICER(S)/DIRECTOR(S)

The name(s) and street address(es) and title(s) to these Articles of Incorporation is(are):

Mark Collins - President 1001 Lake Helen-Osteen Road Lake Helen, FL 32744

#### ARTICLES VI INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Mark Collins 1001 Lake Helen-Osteen Road Lake Helen, FL 32744

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

14th day of October 2003.

Mark Collins - Signature

# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN THE DESIGNATING THE REGISTERED OFFICE/AGENT, IN THE STATE OF FLORIDA.

Stone Masters Masonry Inc.

		•	
2. The name and address of the r	egistered agent and office is:	í i	
	Mark Collins		
	Name		_
	1001 Lake Helen-Osteen Roa	ıd	
	(P.O. Box or Mail Drop B	ox NOT Acceptable)	
	Lake Helen, FL 32744		
	(City / State /	Zip)	
		i	•
agent and agree to act in this c	nated in this certificate, I hereby accept capacity. I further agree to comply with a plete performance of my duties, and a segistered agent.	h the provisions of all th	e statutes
	<del></del>	<b>!</b>	
		. : : ! !	FILED 03 OCT 23 A SECRETARY OF TALLAHASSEE
Mah Gal	2 <del>.</del>	October 14, 2003	AHIO: 35 OF STATE EE, FLORID
Mark Collins SIGNATURE		(Date)	35 AFE