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# FLORIDA PROFIT CORPORATION OR P.A.

Colored Aggregate Systems, Inc.

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# ARTICLES OF INCORPORATION OF

SECRETARY OF STATE TALLAHASSEE, FLORIDA

## COLORED AGGREGATE SYSTEMS, INC.

The undersigned, acting as incorporator of a corporation under the Florida Business Corporation Act, adopts the following Articles of Incorporation:

#### ARTICLE I. NAME

The name of this corporation is Colored Aggregate Systems, Inc.

## ARTICLE II. PRINCIPAL OFFICE OR MAILING ADDRESS OF CORPORATION

The street address of the Corporation's principal office of this corporation is: 1616 South 14th Street, Leesburg, Florida 34748. The mailing address of this corporation is:1616 South 14th Street, Leesburg, Florida 34748.

#### ARTICLE III. CAPITAL STOCK

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

Five thousand (5,000) shares of common stock all of one class, having a nominal or par value of ONE CENT (\$.01) per share.

#### ARTICLE IV. INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered agent of this corporation is 1616 South 14th Street, Leesburg, Florida 34748. The name of the initial registered agent of this corporation at that address is Gary L. Jones.

#### ARTICLE V. INCORPORATOR

The name and address of the Incorporator is Gary L. Jones, 1616 South 14th Street, Leesburg, Florida 34748.

#### ARTICLE VI. AMENDMENT

This corporation reserves the right to amend or repeal any provisions contained in these

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Articles of Incorporation, or any amendment hereto, and any right conferred upon the shareholders is subject to this reservation.

## ARTICLE VII. INDEMNIFICATION

The Corporation shall indemnify its officers and directors to the fullest extent permitted by the Florida Business Corporation Act.

IN WITNESS WHEREOF, the undersigned subscriber has executed these Articles of Incorporation this 3/5 day of OCTOBER Incorporator

#### ACCEPTANCE BY REGISTERED AGENT:

I AM FAMILIAR WITH AND ACCE		S AND RESPONSIBILI	TIES AS
REGISTERED AGENT FOR SAID CORP	ORATION.		
Hours sem	<del>4</del>	L.	
Gary L. Jones	==	· •	
STATE OF FLORIDA	<u> </u>		
COUNTY OF LAKE	<del></del> 		
The foregoing instrument was acknown by Gary L. Jones, Incorporator, who did not Shuken Queen NOTARY PUBLIC-STATE OF FLORIDA (Signature of Notary)	take an oath.	[SEAL] Shirley A hvay My Commission DD02 Expires May 22, 2005	
(Typed name of Notary)	<del>-</del> <del>-</del> <del>(</del> (	Commission Number)	ALL ALL
Personally known or Produced Identification	Type of Identific	estion	CRETARY I