

**P03000136498**

(Requestor's Name)

(Address)

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PICK-UP

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WAIT

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MAIL

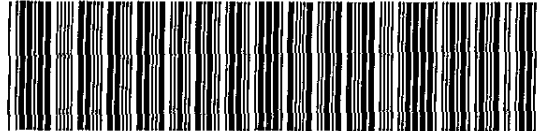
(Business Entity Name)

(Document Number)

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# CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301  
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Lowery Backhoe Service Inc.

Signature

Requested by:

Name

Date

Time

Walk-In

Will Pick Up

- ☒ Art of Inc. File
- ☐ LTD Partnership File
- ☐ Foreign Corp. File
- ☐ L.C. File
- ☐ Fictitious Name File
- ☐ Trade/Service Mark
- ☐ Merger File
- ☐ Art. of Amend. File
- ☐ RA Resignation
- ☐ Dissolution / Withdrawal
- ☐ Annual Report / Reinstatement
- ☒ Cert. Copy
- ☐ Photo Copy
- ☐ Certificate of Good Standing
- ☐ Certificate of Status
- ☐ Certificate of Fictitious Name
- ☐ Corp Record Search
- ☐ Officer Search
- ☐ Fictitious Search
- ☐ Fictitious Owner Search
- ☐ Vehicle Search
- ☐ Driving Record
- ☐ UCC 1 or 3 File
- ☐ UCC 11 Search
- ☐ UCC 11 Retrieval
- ☐ Courier

**ARTICLES OF INCORPORATION  
OF  
LOWERY BACKHOE SERVICE, INC.**

The undersigned, for the purpose of forming a corporation under the Florida Business Corporation Act, adopt the following articles of incorporation:

**ARTICLE ONE  
NAME**

The name of the corporation is **Lowery Backhoe Service, Inc.**

**ARTICLE TWO  
PRINCIPAL OFFICE**

The street address of the initial principal office of the corporation is 21455 S.W. 234<sup>th</sup> Street, Homestead, Florida 33031.

**ARTICLE THREE  
CORPORATE DURATION**

The duration of the corporation is perpetual commencing with the filing of these Articles with the Florida Secretary of State.

**ARTICLE FOUR  
PURPOSE OR PURPOSES**

The general purposes for which the corporation is organized are:

1. To transact any lawful business for which corporations may be incorporated under the Florida Business Corporation Act.
2. To do such other things as are incidental to the above or necessary or desirable in order to accomplish the above.
3. Principal purpose is backhoe services.

**ARTICLE FIVE  
CAPITALIZATION**

The aggregate number of shares which the corporation is authorized to issue is one hundred (100). Such shares shall be of a single class, and shall have a par value of \$120.00 per share.

**ARTICLE SIX  
REGISTERED OFFICE AND AGENT**

The street address of the initial registered office of the corporation is 1310 N. Krome Avenue, Homestead, Florida 33030, and the name of its initial registered agent at such address, is Charles R. Rowe.

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**ARTICLE SEVEN  
DIRECTORS**

This Corporation shall be run by the shareholders. Each shareholder shall be a director. The number of directors constituting the initial Board of Directors of the Corporation is one (1). The name and address of the initial director who is to serve as the initial Board of Directors is:

<u>Name</u>	<u>Address</u>
Roger Dale Lowery	21455 S.W. 234 <sup>th</sup> Street Homestead, FL 33031

**ARTICLE EIGHT  
INCORPORATORS**

The name and address of each incorporator is:

<u>Name</u>	<u>Address</u>
Roger Dale Lowery	21455 S.W. 234 <sup>th</sup> Street Homestead, FL 33031

EXECUTED by the undersigned at Homestead, Dade County, Florida, on this 18<sup>th</sup> day of November, 2003.

  
ROGER DALE LOWERY


STATE OF FLORIDA  
COUNTY OF MIAMI-DADE

} SS:

The foregoing instrument was acknowledged before me this 18<sup>th</sup> day of November, 2003, by Roger Dale Lowery. He is personally known to me or has produced a Florida driver's license as identification. An oath was not taken.



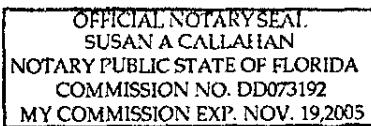
CHARLES R. ROWE  
MY COMMISSION # DD 229742  
EXPIRES: August 23, 2007  
Bonded Thru Budget Notary Services

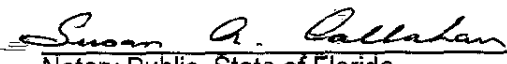
  
Notary Public, State of Florida  
Print Name: Charles R. Rowe  
Commission No.: DD 229742  
My Commission Expires: August 23, 2007

I, Charles R. Rowe, accept the office of Registered Agent. I am located at 1310 North Krome Avenue, Homestead, Florida 33030, and my mailing address is 1310 North Krome Avenue, Homestead, Florida 33030.

  
\_\_\_\_\_  
Charles R. Rowe

SWORN TO and SUBSCRIBED before me this 18<sup>th</sup> day of November, 2003. An oath was taken. I relied on a Florida driver's license for identification.



  
\_\_\_\_\_  
Notary Public, State of Florida  
Print Name: Susan A. Callahan

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