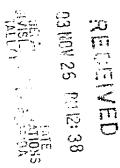
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TALLAHASSEE, FLORIDA

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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

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# ARTICLES OF INCORPORATION OF

## KING CONCRETE SPECIALISTS, INC.

SECRETARY OF STATE TALLAHASSEE, FLORIDA

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

#### ARTICLE I: NAME

The name of the corporation is KING CONCRETE SPECIALISTS, INC.

#### ARTICLE II: PRINCIPAL OFFICE

The principal place of business and mailing address of the corporation is 829 Caryville Road, Post Office Box 201, Bonifay, FL 32425.

#### ARTICLE III: CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is five hundred (500) shares having no par value.

#### ARTICLE IV: INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is Roy Lake, Attorney At Law, 202 North Waukesha Street, Bonifay, FL 32425.

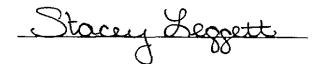
#### ARTICLE V: INCORPORATOR

The name and address of the incorporator of these Articles of Incorporation is Your Capital Connection, Inc., 417 E. Virginia St., Suite 1, Tallahassee, FL 32301.

#### ARTICLE VI: OFFICERS AND DIRECTORS

The name and address of the initial Board of Directors is President/ Director: John King, 829 Caryville Road, Post Office Box 201, Bonifay, FL 32425.

The undersigned has executed these Articles of Incorporation this 26<sup>th</sup> day of November 2003. Your Capital Connection, Inc., by Stacey Leggett, Client Representative



#### CERTIFICATE OF DESIGNATION OF REGISTERED AGENT

Having been named as registered agent and to accept service of process for KING CONCRETE SPECIALISTS, INC., at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the property and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.

Signature

Printed name ROY LAKE

Address

202 NORTH WAUKESHA STREET

**BONIFAY, FLORIDA 32425** 

Date

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