

P03000146944

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)



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(Business Entity Name)

(Document Number)

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SECREARY OF STATE
TALLAHASSEE, FLORIDA

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TRANSMITTAL LETTER

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

SUBJECT: TRI-COUNTY CONCRETE PUMPING AND REMOVAL, 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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status
ADDITIONAL COPY REQUIRED

FROM: AMERICAN ACCOUNTING ASSOC., INC.
Name (Printed or typed)

506 S Federal Hwy Ste 201
Address

Stuart FL 34994
City, State & Zip

772-286-7005
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:

TRI-COUNTY CONCRETE PUMPING AND REMOVAL, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

225 SW HOMELAND RD
PORT ST LUCIE FL 34953

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

CONCRETE PUMPING AND REMOVAL

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

GARY A. DIXON
225 SW HOMELAND RD
PORT ST LUCIE FL 34953

ARTICLE VI REGISTERED AGENT

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

GARY A. DIXON
225 SW HOMELAND RD
PORT ST LUCIE FL 34953

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

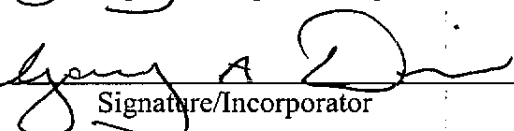
GARY A. DIXON
225 SW HOMELAND RD
PORT ST LUCIE FL 34953

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

11/25/03
Date



Signature/Incorporator

11/25/03
Date

03 DEC -1 AM 10:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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