

P03000147258

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

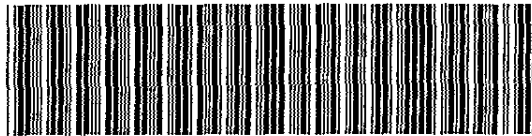
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



700025123517

12/04/03--01020--008 \*\*78.75

FILED  
2003 DEC -4 PM 2:02  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

12-29-03  
B

TRANSMITTAL LETTER

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

SUBJECT: GUNDERSON CEMENT & MASONRY 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  
Filing Fee

\$78.75  
Filing Fee  
& Certificate of Status

\$78.75  
Filing Fee  
& Certified Copy

\$87.50  
Filing Fee,  
Certified Copy  
& Certificate of  
Status

ADDITIONAL COPY REQUIRED

FROM: Colley Financial Services Inc.  
Name (Printed or typed)

209 US 27 S  
Address

LAKE PLACID FL 33852  
City, State & Zip

863-465-6473  
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:

GUNDERSON CEMENT & MASONRY INC.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/ mailing address is:

207 WASHINGTON BLVD  
LAKE PLACID FL 33852

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Construction

**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):

DALE GUNDERSON 207 WASHINGTON BLVD LAKE PLACID, FL 33852  
President, Sec, TREAS.

**ARTICLE VI REGISTERED AGENT**

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

Colley Financial Services Inc.  
209 US 27 S  
LAKE PLACID FL 33852

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Colley Financial Services Inc  
209 US 27 S  
LAKE PLACID FL 33852

\*\*\*\*\*

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

Francis A Colley  
Signature/Registered Agent

12/2/03  
Date

Francis A Colley  
Signature/Incorporator

12/02/03  
Date

2003 DEC -4 PM 2:02  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED