

P03000157823

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

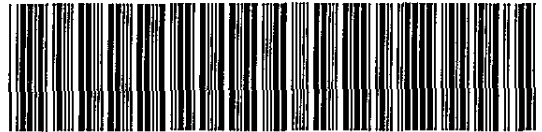
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Certified Copies _____

Certificates of Status _____

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RECEIVED
03 DEC 30 PM 1:42
DIVISION OF CORPORATION

TRANSMITTAL LETTER

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

SUBJECT: Nason Technologies 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: Tammie M. Nason
Name (Printed or typed)

50 McCallister Rd.
Address

Crawfordville, FL 38627
City, State & Zip

(850) 251-4890
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:

Nason Technologies Inc

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

*50 McCallister Rd
Crawfordville, FL 38827*

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

*To engage in the installation, repair and the maintenance of
underground facilities and contracting work incidental to or connected
with such work*

ARTICLE IV SHARES

The number of shares of stock is:

100 shares at \$1.00 per value

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

*Tammie M. Nason, President
50 McCallister Rd, Crawfordville, FL 38827
Karl E. Nason, Vice President
50 McCallister Rd, Crawfordville, FL 38827*

ARTICLE VI REGISTERED AGENT

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

*Tammie M. Nason
50 McCallister Rd.
Crawfordville, FL 38827*

*Article VIII
Effective date will
be 1/1/04*

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

*Tammie M. Nason
50 McCallister Rd.
Crawfordville, FL 38827*

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

Tammie M. Nason
Signature/Registered Agent

12-29-03
Date

Tammie M. Nason
Signature/Incorporator

12-29-03
Date