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To:

Division of Corporations

Fax Number : (8

: (850)205-0381

From:

Account Name : YOUR CAPITAL CONNECTION, INC.

Account Number : 120000000257 Phone : (850)224-8870 Fax Number : (850)234-7047

FLORIDA PROFIT CORPORATION OR P.A.

OCALA HYDRAULICS PLUS, INC.

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Capital Connection, Inc.

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ARTICLES OF INCORPORATION

OF

OCALA HYDRAULICS PLUS, INC.

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 OCALA HYDRAULICS PLUS, INC.

ARTICLE II: PRINCIPAL OFFICE

The principal place of business and mailing address of the corporation is 1848 NE Jacksonville Rd., Ocala, FL 34470.

ARTICLE III: CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is one thousand (1,000) shares having a par value of (\$1.00).

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CAPITAL CONNECTION

ARTICLE IV: INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is David L. Lowman, 5155 NE 25th Ave., Ocala, FL 34479.

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: David L. Lowman, Secretary: Lisa A. Lowman, 5155 NE 25th Ave., Ocala, FL 34479.

ARTICLE VI: SPECIAL PROVISIONS

It is the intent of the incorporator and directors that the corporation qualify under Section 1244 of the Internal Revenue Code and that the corporation file as a Sub S Corporation. Such actions as are necessary will be taken by the appropriate officers to accomplish this compliance.

The undersigned has executed these Articles of Incorporation this 14th day of January 2004. Your Capital Connection, Inc., by Stacey Leggett, Client Representative

Harry Loggett.

850 222 1222

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CERTIFICATE OF DESIGNATION

REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 607.0501, Plorida Statutes, the mentioned corporation,

organized under the laws of the state of Florida, submits the following statement in designating the registered office/registered agent, in the state of Florida.	
1. The name of the corporation is: OCALA	HYDRAULIES PLUS, INC.
•	
2. The name and street address of the registered s	agent and office is:
DAVID L. LOWMAN	
5155 NG 25th AVE	<u></u>
OCALA F1 34479	

HAVE BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE CORPORATION 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 PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

Dand Lowman