

# PO4000028436

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(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

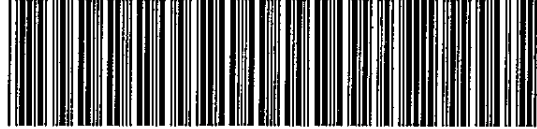
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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

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04 JAN 28 PM 1:46  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

**TRANSMITTAL LETTER**

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

**SUBJECT:** O'Brien Construction Services, 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

<input checked="" type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
<b>ADDITIONAL COPY REQUIRED</b>	

**FROM:** Robert O'Brien  
Name (Printed or typed)

2819 S.W. 42nd Avenue  
Address

Palm City, FL 34990  
City, State & Zip

772-519-6100  
Daytime Telephone number

Robert O'Brien **GAVE**  
**AUTHORIZATION BY PHONE TO**  
**CORRECT** HIT I  
**DATE** 2/5/04  
**DOC. EXAM** \_\_\_\_\_

**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)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE I NAME**

The name of the corporation shall be:

Robert O'Brien's Construction Services, Inc.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

2819 S.W. 42nd Avenue  
Palm City, FL 34990

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Conduct Business Services in accordance with the laws of the State of Florida

**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):

Robert O'Brien, President  
2819 S.W. 42nd Avenue  
Palm City, FL 34990

**ARTICLE VI REGISTERED AGENT**

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

Robert O'Brien  
2819 S.W. 42nd Avenue  
Palm City, FL 34990

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Robert O'Brien  
2819 S.W. 42nd Avenue  
Palm City, FL 34990

\*\*\*\*\*

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

*Robert O'Brien*

Signature/Registered Agent

Robert O'Brien

1-27-04

Date

*Robert O'Brien*

Signature/Incorporator

Robert O'Brien

1-27-04

Date