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(Re	equestor's Name)			
(Ad	dress)			
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(Cit	y/State/Zip/Phone	÷#)		
PICK-UP	MAIT	MAIL		
(Bu	siness Entity Nan	ne)		
(Document Number)				
Certified Copies	Certificates	of Status		
Special Instructions to Filing Officer:				

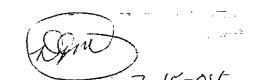




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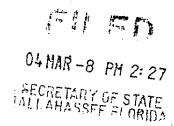
## TRANSMITTAL LETTER

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

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SUIMECT:	DENNIS MORRIS	Construction	INC		
	Dennis Morris Construction Inc (Proposed corporate name - must include sulfix)				
	w				
	•				
•					
Enclosed is an original a	and one(1) copy of the articles	of incorporation and a	check for:		
Cl \$70,00 Filing Fee	<b>□ \$78.75</b> Filling Fee	Cl\$122.50 Filing Fee	□ \$131.25 Filing Fee,		
I mag I w	& Certificate	& Certified Copy	Certified Copy & Certificate		
**		ADDITIONAL CO	PY REQUIRED		
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mon.	D	20010			
FROM:	Dennis Morris  Name (Printed or typed)				
rimino (kantiou or typou)					
. 4621 SW LEY Court					
Addiess					
•					
Port St Lucie FL 34953					
<del></del>	Port St Lucie FL 34953  City, State & Zip				
	••	•			
772-871-6014					
Davilme Telephone number					

NOTE: Please provide the original and one copy of the articles.



## ARTICLES OF INCORPORATION

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 SHALL BE:
DENNIS MORRIS CONSTRUCTION INC

ARTICLES II PRINCIPAL OFFICE
THE PRINCIPAL PLACE OF BUSINESS AND MAILING ADDRESS OF THIS
CORPORATION SHALL BE:
4621 SW LEY COURT
PORT ST LUCIE, FL 34953

ARTICLE III SHARES
THE NUMBER OF SHARES OF STOCK THAT THIS CORPORATION IS
AUTHORIZED TO HAVE OUTSTANDING AT ANY ONE TIME IS:
FIVE HUNDRED (500) SHARES OF COMMON STOCK WITH A PAR VALUE OF
ONE DOLLAR (\$1.00) PER SHARE.

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS:
THE NAME AND FLORIDA STREET ADDRESS OF THE INITIAL REGISTERED
AGENT IS:
DENNIS MORRIS
4621 SW LEY COURT
PORT ST LUCIE, FL 34953

ARTICLE V
NAME OF INCORPORATOR
THE NAME AND ADDRESS OF THE INCORPORATOR TO THESE ARTICLES OF INCORPORATION ARE:
DENNIS MORRIS
4621 SW LEY COURT
PORT ST LUCIE, FL 34953

SIGNATURE / INCORPORATOR DATE

ARTICLE VI NAME AND ADDRESS OF PRINCIPAL OFFICER OF THE CORPORATION DENNIS MORRIS 4621 SW LEY COURT PORT ST LUCIE, FL 34953

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SECRETARY OF STATE MALLAHASSEE FLORIDA

SIGNATURE PRINCIPAL OFFICER

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT 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.

SIGNATURE / REGISTERED AGENT