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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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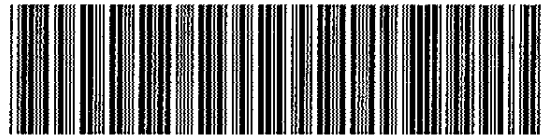
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

~~03-17-04~~
03-17-04
T.B.

TRANSMITTAL LETTER

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

SUBJECT: PROFESSIONAL CONCEPTS OF N.W. FLORIDA, 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 ☒ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☒ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status
ADDITIONAL COPY REQUIRED

FROM: PROFESSIONAL CONCEPTS OF N.W. FLORIDA, INC.
Name (Printed or typed)

210 North Garfield Drive
Address

Pensacola, Florida 32505
City, State & Zip

850-449-8696
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:

PROFESSIONAL CONCEPTS OF N.W. FLORIDA, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

210 North Garfield Drive, Pensacola, Florida 32505

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Residential Concrete / Masonry

ARTICLE IV SHARES

The number of shares of stock is:

5,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Daron B. Horne, President, 210 Garfield Dr, Pensacola, Fl. 32505

Tricia D. Horne, Sec., 210 Garfield Dr., Pensacola, Fl. 32505

ARTICLE VI REGISTERED AGENT

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

Daron B. Horne
210 Garfield Drive, Pensacola, Fl. 32505

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Daron B. Horne
210 Garfield Drive, Pensacola, Fl. 32505

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

x Daron B. Horne
Signature/Registered Agent

3-2-04
Date

x Yonica Horne
Signature/Incorporator

3/3/04
Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA