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# CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

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### FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

February 6, 2004

CAPITAL CONNECTION INC

SUBJECT: WEST COAST CONCRETE PUMPING INC.

Ref. Number: W04000005188

We have received your document for WEST COAST CONCRETE PUMPING INC.. However, the document has not been filed and is being returned for the following:

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with a notarized affidavit stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

## Adding "of Florida" or "Florida" to the end of a name is not acceptable.

The document number of the name conflict is P99000002929.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6934.

Letter Number: 404A00008317

Loria Poole Document Specialist New Filings Section OLAPR 26 AM 9: 34

# ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit) ARTICLE I CONCRETE PampiNG INC. The name of the corporation shall be: ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: P.O. BOX 260 HOMOSASSA FL ARTICLE III *PURPOSE* The purpose for which the corporation is organized is: CONCRES ARTICLE IV The number of shares of stock is: INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s): P.O. BOX HOMOSASSA The name and Florida street address of the registered agent is: S. MASON CREEK RY MOSASSA FL 34448 INCORPORATOR ARTICLE VII The name and address of the Incorporator is: RICKETSON Robert P.O. BOX

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

Signature/Registered Agent

Date

1-29-04

Date

1-29-04

Signature/Incorporator

Date