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(Requestor's Name)

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(Address)

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

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

☐ PICK-UP

☐ WAIT

☐ MAIL

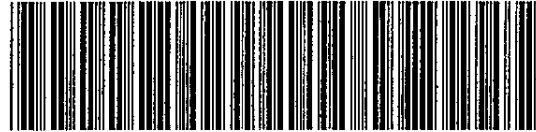
\_\_\_\_\_  
(Business Entity Name)

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

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

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## TRANSMITTAL LETTER

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

SUBJECT: US CONSTRUCTION PRODUCTS, 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: JACK FODEN  
Name (Printed or typed)

P.O. BOX 6  
Address

HOMOSASSA SPRINGS, FL. 34447  
City, State & Zip

352-628-7120  
Daytime Telephone number

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MAILED  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

**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: US CONSTRUCTION PRODUCTS, INC.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is: 4596 FLAMBEAU LOOP  
HOMOSASSA, FL 34448  
MAILING: P.O. BOX 6  
HOMOSASSA SPRINGS, FL. 34447

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:  
FOR LEGAL REASONS

**ARTICLE IV SHARES**

The number of shares of stock is: TWO SHARES

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

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

JACK FODEN -- PRESIDENT  
4596 FLAMBEAU LOOP  
HOMOSASSA, FL. 34448

LINDA FODEN --VICE PRESIDENT &  
4596 FLAMBEAU LOOP SECRETARY  
HOMOSASSA, FL. 34448

MAILING: P.O. BOX 6

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

JACK FODEN  
4596 FLAMBEAU LOOP  
HOMOSASSA, FL. 34448

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

JACK FODEN  
4596 FLAMBEAU LOOP  
HOMOSASSA, FL. 34448

\*\*\*\*\*

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

8-3-04  
Date

  
Signature/Incorporator

8-3-04  
Date

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STATE OF FLORIDA  
DIVISION OF CORPORATIONS