

CAPITAL CONNECTION

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Florida Department of State
Division of Corporations
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To:

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Fax Number : (850) 205-0381

From:

Account Name : YOUR CAPITAL CONNECTION, INC.
Account Number : I20000000257
Phone : (850) 224-8870
Fax Number : (850) 224-7047

RE-SUBMIT
PLEASE OBTAIN THE ORIGINAL
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FLORIDA PROFIT CORPORATION OR P.A.

AMERICAN CONSTRUCTION FLORIDA INC.

Certificate of Status	1
Certified Copy	1
Page Count	01
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Capital Connection, Inc.

CAPITAL CONNECTION
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PAGE 001/001 Florida Dept of State



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

October 4, 2004

YOUR CAPITAL CONNECTION, INC.

SUBJECT: AMERICAN CONSTRUCTION FLORIDA INC.
REF: W04000036497

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We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

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Becky McKnight
Document Specialist
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CAPITAL CONNECTION

850,222,1222

10/05 '04 08:50 NO.014 03/03

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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:

AMERICAN CONSTRUCTION CENTRAL FLORIDA, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

250 SECURITY SQUARE
WINTER HAVEN, FL 33880-6315

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

RESIDENTIAL + COMMERCIAL REPAIRS + IMPROVEMENTS

ARTICLE IV SHARES

The number of shares of stock is:

100,000

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

STEPHEN D. VAUGHAN, PRESIDENT
3714 RED OAK COURT
LAKE WALES, FL 33898

ARTICLE VI REGISTERED AGENT

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

STEPHEN D. VAUGHAN
3714 RED OAK COURT
LAKE WALES, FL 33898

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

STEPHEN D. VAUGHAN
3714 RED OAK COURT
LAKE WALES FL 33898

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

Signature/Incorporator

Date

Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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