

PO4000159804

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

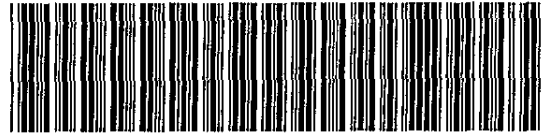
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SECRETARY OF STATE
TALLAHASSEE FLORIDA

T4 11/24/04

TRANSMITTAL LETTER

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

SUBJECT: International Aggregates Bermuda Corporation
(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
Filing Fee

☒ \$78.75
Filing Fee
& Certificate of Status

☐ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: Alfonso C. Garcia
Name (Printed or typed)

540 Cypress Pointe Drive East
Address

Pembroke Pines FL 33027
City, State & Zip

305.586.5993
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:

International ~~Aggregates~~ Aggregates Bermuda Corporation

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

540 Cypress Pointe Drive East
Pembroke Pines, FL 33027

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Construction Related Management

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

GianCarlo Bertolin President
Alex Treleaven Vice President
GianCarlo Bertolin Secretary

ARTICLE VI REGISTERED AGENT

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

Lisa Garcia
540 Cypress Pointe Drive East
Pembroke Pines, FL 33027

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Lisa Garcia
540 Cypress Pointe Drive East
Pembroke Pines, FL 33027

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

Lisa Garcia

Signature/Registered Agent

Lisa Garcia

Signature/Incorporator

11/16/04

Date

11/16/04

Date

FILED
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SECRETARY OF STATE
TALLAHASSEE FLORIDA