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SECRETARY OF STATE ALLAHASSEE, FLOXIDA

TRANSMITTAL LETTER.

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

SUBJECT: Cutts	Construction, Inc.			
	(PROPOSED CORPOR	ATE NAME – <u>MUSTINCL</u>	UDE SUFFIX)	
Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation and	l a check for:	
\$70.00	☑ \$78.75	\$78.75	\$87.50	
Filing Fee	Filing Fee	Filing Fee	Filing Fee,	
•	& Certificate of Status	& Certified Copy	Certified Copy	
			& Certificate of	
			Status	
		ADDITIONAL COPY REQUIRED		
		<u> </u>	·	
FROM:	Michael Cutts			
	Name (Printed or typed)			
	5955 Twin Oaks Dr.			
		Address		
	Pace, Fl. 32571			
		, State & Zip	· · · · · · · · · · · · · · · · · · ·	
	(850) 994-9000			
•	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:

Cutts Construction, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 5955 Twin Oaks Dr., Pace, Fl. 32571

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Any and all lawful purposes



The number of shares of stock is: 100

ARTICLE V __ INITIAL OFFICERS AND/OR DIRECTORS

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

Michael Cutts, 5955 Twin Oaks Dr., Pace, Fl 32571, President Tamra Cutts, 5955 Twin Oaks Dr., Pace, Fl 32571, Secretary Vice President

ARTICLE VI REGISTERED AGENT

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

Tamra Cutts, 5955 Twin Oaks Dr., Pace, Fl. 32571

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Michael Cutts, 5955 Twin Oaks Dr., Pace, Fl 32571

Signature/Incorporator