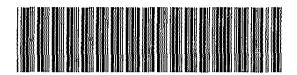
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TRANSMITTAL LETTER

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

SUBJECT:	Exuality Mas	SONTY INC.	UDE SUFFIX)	
		٠		
Enclosed are an ori	ginal and one (1) copy of the art	icles of incorporation and	d a check for:	
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy ADDITIONAL CO	S87.50 Filing Fee, Certified Copy & Certificate of Status DPY REQUIRED	
FROM:	Anthony J. Name 4457 Fairfax Marianna City	Rd Address	14 P# 2: RY OF STAT SEE, FLORI	77 - 77
	(850) 557-	4672		

NOTE: Please provide the original and one copy of the articles.

Daytime Telephone number

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)
ARTICLE I NAME The name of the corporation shall be: Quality Masonry Inc.
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: UUST Fairfax Rd. Marianna Fl. 32446
ARTICLE III PURPOSE The purpose for which the corporation is organized is: Construction ARTICLE IV SHARES The number of shares of stock is:
ARTICLE IV SHARES The number of shares of stock is: (one)
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s):
Anthony J. Conklin Sr. (Owner)
Anthony J. Conklin Sr. (Owner) 4457 Fairfax Rd. Marianna Fl. 32446
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:
Toni-Jo Carnley
4355 Kelson Ave. Marianna Fl. 32446 ARTICLE VII INCORPORATOR
The name and address of the Incorporator is:
Toni-To Carnley
4355 Kelson Ave. Marianna Fl. 32446 ***********************************
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 1/15/04 Date
Signature/Incorporator Date

ARTICLES OF INCORPORATION