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(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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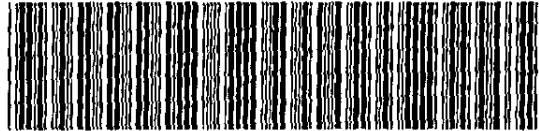
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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JAN 13 2005
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is

TRANSMITTAL LETTER

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

SUBJECT: Peter M Monteleone 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
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: Peter M Monteleone
Name (Printed or typed)

394 Summit Ave.
Address

Lake Helen, FL 32744
City, State & Zip

386-801-3474 or 386-738-3555
Daytime Telephone number

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

FILED
05 JUN 13 PM 2:08
TALLAHASSEE, FL 32314
DIVISION OF CORPORATIONS
STATE OF FLORIDA

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:

Peter M Monteleone, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

Peter M Monteleone Inc. 394 Summit Ave
Lake Helen, FL 32744

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Construction Sub Contracting

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):

Peter M Monteleone (General Manager)

ARTICLE VI REGISTERED AGENT

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

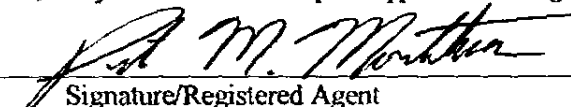
Peter M Monteleone ~~Inc.~~ 394 Summit Ave.
Lake Helen, FL 32744

ARTICLE VII INCORPORATOR

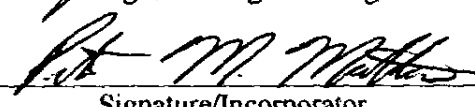
The name and address of the Incorporator is:

Peter M Monteleone 394 Summit Ave.
Lake Helen, FL 32744

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

08 JAN 05
Date


Signature/Incorporator

08 JAN 05
Date

FILED
JAN 13 PM 2:03
TALLAHASSEE, FLORIDA