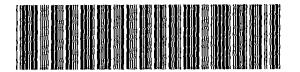
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## TRANSMITTAL LETTER

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

SUBJECT:	PROPOSED CORPORA	T/C te name - <u>must incl</u>	UDE SUFFIX)		
Enclosed are an orig	inal and one (1) copy of the arti	cles of incorporation and	d a check for:		
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED		
FROM:	Lev: Harrill 205 Perssimon	(Printed or typed) Address	<del></del>	05 HAY -5 PH	
	/850) a10-2	State & Zip  A2/0 elephone number	}	1:58	SIAH

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) \_\_NAME ARTICLE I The name of the corporation shall be: Levi Harvill, Inc. ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 205 Perssimon Rd Sopchoppy, fla 30358 ARTICLE III PURPOSE The purpose for which the corporation is organized is: construction 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): Levi Harvill - President 205 Perssimon Ad Sopehoppo, fla 30358 ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Levi Harvill 205 Perssimon Rd. sopchopping ifta 30358 **INCORPORATOR** The name and address of the Incorporator is: Levi Harvill 205 Perssimon Rd. Sopchoppy fla 32358 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