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TRANSMITTAL LETTER

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

SUBJECT: W-		ncrete Devite name - must include suffi	nuices, Ino.
Enclosed is an original and	l one(1) copy of the article	es of incorporation and a	check for :
☐ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate PY REQUIRED
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-	-	State & Zip	2

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

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

ALI-BABA CONCRETE SERVICES, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

537-A BURLINGTON ST. OPA-LOCKA, FL 33054

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

10,000 Common Shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

NORBERTO ALFONSO 821 BURLINGTON ST. OPA-LOCKA, FL 33054

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

PRESIDENT:

HENRY GARCIA

2491 S.W. 64th AVE

MIRAMAR, FL. 33023

VICE-PRESIDENT/

NORBERTO ALFONSO

821 BURLINGTON ST.

SECRETARY

OPA-LOCKA, FL. 33054

Signature Incorporator Date

(An additional article must be added if an effective date is requested.)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Signarure/Registered Agent Date