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(PROVIDE NUMBER FOR...)

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SECRETARY OF FLORIDA  
TALLAHASSEE, FLORIDA  
05 SEP - 1 AM 11:12

me  
9/2

**TRANSMITTAL LETTER**

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

**SUBJECT:** Tiger's Concrete & Slab 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:** Edgar G. Jusino  
Name (Printed or typed)

1918 Escambia Lane  
Address

Kissimmee, FL 34759  
City, State & Zip

863-427-1075  
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)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

05 SEP -1 AM 11:12

**ARTICLE I NAME**

The name of the corporation shall be:

Tiger's Concrete & Slab Inc.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/ mailing address is:

1918 Escambia Ln  
Kissimmee, FL 34759

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Concrete and Slab Work

**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):

Edgar G. Jusino 1918 Escambia Ln Kissimmee, FL 34759 PRESIDENT	Jeannette Jusino 1918 Escambia Ln Kissimmee, FL 34759 VICE-PRESIDENT	Edgar Jusino 1918 Escambia Ln Kissimmee, FL 34759 TREASURER	Gladys Gonzalez 1918 Escambia Ln Kissimmee, FL 34759 SECRETARY
-------------------------------------------------------------------------	-------------------------------------------------------------------------------	----------------------------------------------------------------------	-------------------------------------------------------------------------

**ARTICLE VI REGISTERED AGENT**

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

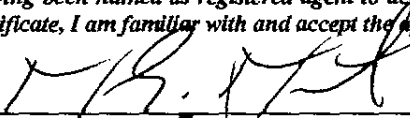
Maria Martinez  
3501 W. Vine St. Suite 389  
Kissimmee, FL 34741

**ARTICLE VII INCORPORATOR**

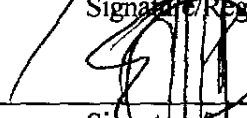
The name and address of the Incorporator is:

Edgar G. Jusino  
1918 Escambia Ln.  
Kissimmee, FL 34759

\*\*\*\*\*  
*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

08/30/05  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

08/30/05  
\_\_\_\_\_  
Date