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(Requestor's Name) (Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:					
(Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	(Requestor's Name)				
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Office Use Only



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ZOOS OCT 24 AM 8: 04
SECRETARY OF STATE

COVER LETTER

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

SUBJECT:	MOSIK CONS	TRUCTION	COPP.
Enclosed are an orig	(PROPOSED CORPORA	ATE NAME - MUST INCL	
□ \$70.00	S78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status
FROM:	PHILIP A Name	HCKAY e (Printed or typed) TWIST CT. Address	
	·	ARK FC. 32. State & Zip S-5922 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)

FILED

ARTICLE I NAME

The name of the corporation shall be:

MOSIK CONSTRUCTION CORP.

2005 OCT 24 AM 8: 03

SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

1962 OAK TWIST ct DRONGE PORIL FC. 32073.

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

GENERAL CONSTRUCTION

ARTICLE IV SHARES

The number of shares of stock is:

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

PHICIP A. MCKAY
1962 DAK TRUST CE
DRANGE PARK FC. 32073
TITLE: P.

ARTICLE VI REGISTERED AGENT

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

PHILIP À. MCKMY 1962 DAK TWIST CT DRANGE PARK FC. 32073

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

PHILIP A. MCKAY
1962 DAK TWIST CT
ORANGE PARK FL. 32073

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

Date

Date

Signature/Incorporator

Date