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(Requestor's Name)			
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(Address)			
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(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
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COVER LETTER

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

SUBJECT:	Spria Cons	Truction Fig. PORATE NAME - MUST INCL	
	' (PROPOSED COR	PORATE NAME – <u>MUST INCL</u>	<u>UDE SUFFIX</u>)
Enclosed are an orig	rinal and one (1) copy of t	he articles 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
		L	
FROM:	TRESON	Name (Printed or typed)	·
	442	7 (CIDDLE Creek) Address	л
	TALLAMASSO	City, State & Zip	<u> </u>
	850 Day	668-0956 time Telephone number	

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

A PARKOL TA E SYARETO	
ARTICLE I NAME The name of the corporation shall be:	g Construction Inc.
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address	is: 4427 (ciaak (cook)
ARTICLE III PURPOSE The purpose for which the corporation is organ	4427 (ripok Creek be. TA-1144455ee, FL 37309
The purpose for white the corporation is the	Construction
ARTICLE IV SHARES The number of shares of stock is:	SECRETARY TALLAHASSES
ARTICLE V INITIAL OFFICERS AS List name(s), address(es) and specific title(s):	ND/OR DIRECTORS T - PASSON FOSTER Address = Same
ARTICLE VI REGISTERED AGEN The name and Florida street address (P.O. Be	
,	PRESTON FOSTER
ARTICLE VII INCORPORATOR The name and address of the Incorporator is:	
	Address Same

Tan For	- 12/165
Signature/Registered Agent	Date

Signature/Incorporator

12/1/05

Date