P05000161219

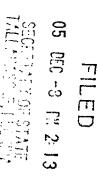
(Re	equestor's Name)	
(Ad	ldress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	#)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
		i

Office Use Only



400061895974

12708/905-101024-1012 **/0.00



C.S. 12-9

COVER LETTER

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

SUBJECT: - JUSKEY'S HAW!	ng + BACK HOE inc.
Enclosed are an original and one (1) copy of the artic	
\$70.00 \$78.75 Filing Fee Filing Fee & Certificate of Status	\$78.75 \$87.50 Filing Fee Filing Fee, & Certified Copy Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED
FROM: Pubrey L. Name Rame Porce De	•
850-951 Daytime To	

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)
ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit) ARTICLE I NAME The name of the corporation shall be: Aubreu's Hauling and Backhoe Inc. ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is:
Aubrey's Hauling and Backhoe Ing 2/3
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 320 K t M Forms Rd. Ponce De Leon, FL 30455 ARTICLE III PURPOSE The purpose for which the corporation is organized is: To Perform Tractor Services
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): Aubrey L. Stanley 320 K&M Farms Rd. Ponce Deleon, FL 30455
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:
Aubrey L. Stanley 320 K-M Farms Rd. Ponce Deleun, FL 33455 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Aubrey L. Stanley 320 Kath Farms Rd.
Ponce Deleon, Fl 30455
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 Date Date