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# TRANSMITTAL LETTER

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

	MASTERSON BA (Proposed cor)	porate name - must include su	ffix)
osed is an origina	al and one(1) copy of the artic	les of incorporation and a	check for:
\$2 \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	□\$78.75 Filing Fee & Certified Copy	☐ \$87.50  Filing Fee,  Certified Copy <a href="#"></a>
		ADDITIONAL CO	<del>-</del>
FROM:	VEBER & Association Name (I	TREET WEST Address	O6 AUG 29 PM 1: 16 SECRETALY: F STATE TALLAKASSEE, FLORIDA
	941-129-3: Da, thre T	•	16 ATE PRIDA

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

## ARTICLES OF INCORPORATION

#### **OF**

# MASTERSON BACKFLOW TESTING INC.

The undersigned subscriber to these Articles of Incorporation, a natural person Competent to contract, hereby forms a corporation under the laws of the State of Florida.

## ARTICLE I

#### NAME OF CORPORATION

The name of the corporation shall be:

#### MASTERSON BACKFLOW TESTING INC.

#### **ARTICLE II**

This corporation may engage in or transact any of all lawful activities of business permitted under the laws of the United States, the State of Florida, of any other states, country, territory or nation.

#### ARTICLE III

#### CAPITAL STOCK

The maximum number of shares that this corporation is authorized to have outstanding at any one time is one thousand (1000) shares having a par value of one Dollar (\$1.00) per share. The minimum capital with which this corporation shall begin business is one hundred (100) shares.

#### **ARTICLE IV**

#### TERM OF EXISTENCE

This corporation is to exist perpetually.

#### **ARTICLE V**

#### REGISTERED OFFICE AND AGENT

The street address of the initial principal office of this corporation is 31510 Anson Acres Rd, Myakka. Fl. 34251 and the name of the initial registered agent of this corporation at that address is David Masterson.

#### ARTICLE VI

#### INITIAL BOARD OF DIRECTORS

This corporation shall have one (1) directors initially. The number of directors may be either increased or diminished from time to time by the By-Laws adopted by the shareholders.

Name

Address

**David Masterson** 

31510 Anson Acres RD Myakka, Fl. 34251

#### ARTICLE VII

#### **SUBSCRIBERS**

The name and post office address of the subscriber to these Articles of Incorporations are:

Name

Address

**David Masterson** 

31510 Anson Acres Rd Myakka, Fl. 34251

#### ARTICLE VIII

#### **BY-LAWS**

The Board of Directors is authorized to adopt By-Laws, including provisions governing the issuance of stock certificates to replace lost or destroyed stock certificates and provisions prohibiting the transfer of the stock of the corporation and of the preemptive rights to such stock, provided such By-Laws are not contrary to the laws of the State of Florida.

#### **ARTICLE IX**

#### **AMENDMENT**

These Articles of Incorporation may be amended in the manner provided by law.

Every amendment shall be approved by the Board of Directors proposed by them to the stockholders and approved at a stockholders' meeting by a majority, or such greater number as may be specified in the By-Laws, of the shares of stock entitled to vote thereon unless all the directors and the stockholders sign a written statement manifesting their intention that a certain amendment of these Articles of Incorporation be made.

IN WITNESS WHEREOF, the undersigned has made, subscribed and Acknowledged these Articles of Incorporation, this \_\_\_\_\_\_ day of August, 2006.

David Masterson

#### STATE OF FLORIDA

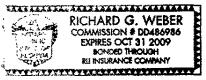
#### **COUNTY OF MANATEE**

BEFORE ME, a Notary Public authorized to take acknowledgments in the State and County set forth above, personally appeared David Masterson known to me to be the person who executed the foregoing Articles of Incorporation, and he acknowledged under oath before me that he executed the same for the purposed therein expressed.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my seal in the State and County aforesaid this 45 day of August, 2006.

NOTARY PUBLIC

My commission expires:



# CERTIFICATE OF DESIGNATION REGISTERED AGENT / REGISTERED OFFICE

Pursuant to the provisions of section 607.0501, Florida Statutes, the undersigned corporation, organized under the law of the state of Florida, submits the following statement in designating the registered agent, in the state of Florida.

1.	The name of the corporation is: MASTERSON BACKFLOW TESTING INC.		
2.	The Name and address of the registered agent and office is:		
	Desid Mantanan		
	David Masterson		
	(NAME)		

(P.O. BOX NOT ACCEPTABLE) ADDRESS

Myakka, Florida 34251 (CITY / STATE / ZIP)

31510 Anson Acres Rd

,

SIGNATURE

TITLE PRESIDENT

DATE AUGUST 75

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACED DESIGNATED IN THIS CERTIFICATE, I HEREBY\_ACCEPT THE APPOINTMENNT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH 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 A REGISTERED AGENT.

SIGNATURE

DATE AUGUST 75, 2006