

207000025354

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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SECOND JUDGE STATE  
TALLAHASSEE, FLORIDA

J. Shivers FEB 27 2007

## COVER LETTER

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

**SUBJECT:** Tri-County Construction & Demolition 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:** JamieLee Pierce

Name (Printed or typed)

3345 Okeechobee Road

Address

Fort Pierce, FL. 34947

City, State & Zip

772-465-1414

Daytime Telephone number

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**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)

## **ARTICLE I NAME**

The name of the corporation shall be:

Tri-County Construction & Demolition Inc

## **ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

3345 Okeechobee Road  
Fort Pierce, FL. 34947

## **ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Any and all lawful business

## **ARTICLE IV SHARES**

The number of shares of stock is:

7,500

## **ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

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

Title: President  
JamieLee Pierce  
3345 Okeechobee Road  
Fort Pierce, FL. 34947

## **ARTICLE VI REGISTERED AGENT**

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

Bob Gorman  
1209 Delaware Avenue  
Fort Pierce, FL. 34950

## **ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

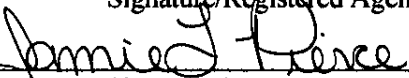
JamieLee Pierce  
3345 Okeechobee Road  
Fort Pierce, FL. 34947

\*\*\*\*\*

*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

2/24/2007  
Date

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

2/24/2007  
Date

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA