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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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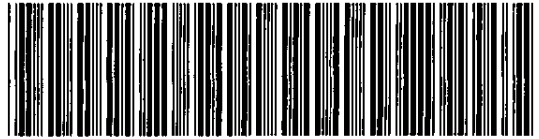
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
ALLAHASSEE, FLORIDA

1/4

## COVER LETTER

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

SUBJECT: MACDADDE CONSTRUCTION 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: Scott D. Macdade  
Name (Printed or typed)

1111 ABADY COURT  
Address

Deltona, FL 32725  
City, State & Zip

407-595-9304  
Daytime 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)

**ARTICLE I NAME**

The name of the corporation shall be: **MACDADE CONSTRUCTION INC.**

**ARTICLE II PRINCIPAL OFFICE**

The principal street address and mailing address, if different is: **1111 ABADY COURT Deltona  
FL. 32725**

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: **Provide Construction Services  
as a General Contractor.**

**ARTICLE IV SHARES**

The number of shares of stock is: **100**

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

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

President  
Vice President } **Scott D. MacDADE**  
Treasurer } **1111 ABADY COURT**  
Secretary } **Deltona FL 32725**

**ARTICLE VI REGISTERED AGENT**

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

**Scott D. MacDADE  
1111 ABADY COURT  
Deltona FL. 32725**

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

**Scott D. MacDADE  
1111 ABADY COURT  
Deltona, FL. 32725**

\*\*\*\*\*  
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

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

FILED  
08 NOV 10 PM 2:07  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**11/6/08**  
\_\_\_\_\_  
Date

**11/6/08**  
\_\_\_\_\_  
Date