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DEPARTMENT OF TATE
NVISION OF CORPORATION
TALLAHASSEE, FLORIOA

RECEIVED

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10 SEP -7 PH 2: 21

SECRCIARY OF SIA:

9/7/10

COVER LETTER •

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

SUBJECT:	John Michael (PROPOSED CORPORA)	LOZA TE NAME - MUST INCLU	UDE SUFFIX)		
Enclosed are an ori	ginal and one (1) copy of the artic				
Filing Fee	■ \$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status		
FROM: Some (Printed or typed)					
2104 Dela Way Ste. 1 Address Tallahassee TC 32303 City, State & Zip					
	Daytime Te Daytime Te TM_Koza @ ya E-mail address: (to be used		10 SEP -7		
	NOTE: Please provide the or	iginal and one copy of	the articles. FLORIDA	O	

John M. Koza 171 Zouthwest 15th Place Cape Coral, Florida 33991 239-849-4400

September 1, 2010

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

Re: Tracking Number 000184882960

To Whom It May Concern:

Please accept this letter as a request to voluntarily release my former corporate name, "John Michael Koza Contracting, Inc.", document number P08000058183. I am refiling for this corporate name. The new document number is W10000040998.

Thank you for your assistance in this matter. If you have any questions I can be reached at the number above.

Sincerely,

John M. Koza

10 SEP -7 PH & 21
SLUNGTART OF STATE
TALLAHASSEE, FI ORIO

ARTICLES OF INCORPORATION

FILED

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

10 SEP -7 PM 2 22

ARTICLE I NAME	gressisov or elera
The name of the corporation shall be:	SECRETARY OF STATE TALLAHASSEE, FLORIDA
John Michael Koza Con	tracting, the
ARTICLE II PRINCIPAL OFFICE	
The principal street address and mailing address if different is:	
1717 S.W. 15th Place, Cape Co	rul, FC 3399/
ARTICLE III PURPOSE	
The purpose for which the corporation is organized is:	
Any and All Lowful business.	·
ARTICLE IV SHARES	
The number of shares of stock is: 10,000 Share 5	
10,000 30 400 3	
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS	
List name(s), address(es) and specific title(s):	
John M Koza, Pies., Se 1717 S.W. 15 12 Place, Cyc.	cretar
1717 SW 1512 Plan Care &	scal FL 33 991
1111 3W, 10 - 110ee, cg = -	
ARTICLE VI REGISTERED AGENT	
The name and Florida street address (P.O. Box NOT acceptable) of the	registered agent is:
John M. Koza,	•
John M. Koza j. 1717 SW, 15 15 Place	
cape coral, FC 33 99/	
ARTICLE VII INCORPORATOR	
The name and address of the Incorporator is:	
Kerk Sition	
2104 Delta Way, Suitel	
Tollahassee, FC 32303	
*****************	******
Having been named as registered agent to accept service of process for	or the above stated corporation at the
place designated in this certificate, I am familiar with and accept the	
agree to act in this capacity	
1/ x	0/-/
for you	7/7/20/0
Signature/Registered Agent	9/7/2010 Date 9/1/2010
16 Juli	9/1/2010
Signature/Incorporator	Date