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TALLAHASSEE, FLORIDA

11 NOV 29 PM 12:17

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COVER LETTER

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

SUBJECT: Elegant Concrete Engraving, 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: Shane Moyer

Name (Printed or typed)

1112 Western Pine Circle

Address

Sarasota, FL. 34240

City, State & Zip

941-351-6604

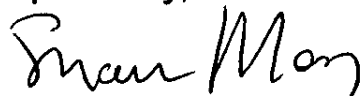
Daytime Telephone number

smoyer15@hotmail.com

E-mail address: (to be used for future annual report notification)

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

To whom it may concern,
I do not intend to reinstate the administratively dissolved corporation
Elegant Concrete Engraving, Inc. and I hereby release the name
Elegant Concrete Engraving, Inc. to the newly formed corporation.
Respectfully,

A handwritten signature in cursive script, appearing to read "Shane Moyer".

Shane Moyer, President
Elegant Concrete Engraving, Inc.

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

Elegant Concrete Engraving, Inc.
The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal street address
1112 Western Pine Circle
Sarasota, FL 34240

11 NOV 28 PM 12:18
MAILING ADDRESS, IF DIFFERENT IS:

SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
The application and maintenance of decorative concrete.

ARTICLE IV SHARES

The number of shares of stock is: 1,000,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Shane Moyer, President
Address: 1112 Western Pine Circle
Sarasota, FL 34240

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: Shane Moyer
Address: 1112 Western Pine Circle
Sarasota, FL 34240

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Shane Moyer
Address: 1112 Western Pine Circle
Sarasota, FL 34240

ARTICLE VIII EFFECTIVE DATE
JANUARY 1, 2012

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

Shane Moyer, PRES.

Required Signature/Registered Agent

11/22/11

Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Shane Moyer, PRES.

Required Signature/Incorporator

11/22/11

Date