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Special Instructions to Filing Officer:

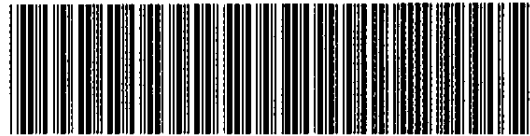
TEX FRANCIS PAVE

ADD INCORPORATION

UNDER RT SIGNATURE

BS

Office Use Only



200214727982

12/01/11--01005--005

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
DEC - 1 AM 11:28

PS 12/2/11

## COVER LETTER

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

SUBJECT: TEX FRANCIS STEEL INC. (TFS)  
(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: TEX FRANCIS

Name (Printed or typed)

289 MAILEN DRIVE

Address

APOPKA FLORIDA 32712

City, State & Zip

407 880 2721

Daytime Telephone number

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

**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)

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

**ARTICLE I NAME**

The name of the corporation shall be:

**TEX FRANCIS STEEL INC.**

11 DEC -1 AM 11:28

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

**289 MAILEN DRIVE  
APOPKA FLORIDA 32712**

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

**PROVIDING PRODUCT AND SERVICES FOR PROFIT**

**ARTICLE IV SHARES**

The number of shares of stock is: **10,000**

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

Name and Title: **TEX FRANCIS (DIRECTOR)**

Address: **289 MAILEN DRIVE  
APOPKA FLORIDA 32712**

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: **TEX FRANCIS**

Address: **289 MAILEN DRIVE  
APOPKA FLORIDA 32712**

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: **TEX FRANCIS**

Address: **289 MAILEN DRIVE  
APOPKA FLORIDA 32712**

*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*

TEX FRANCIS  
Required Signature/Registered Agent /Incorporator

11.29.11  
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.*

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

\_\_\_\_\_  
Date