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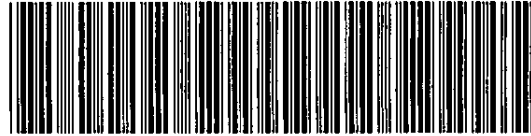
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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COVER LETTER

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

SUBJECT: J. P. Skinner & Sons, 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: J. P. Skinner & Sons, Inc.
Name (Printed or typed)

519 Elizabeth Lane
Address

Lakeland, FL. 33809
City, State & Zip

863-859-7765 P/F 863-370-3213 Cell
Daytime Telephone number

Clayton361@Verizon.Net.
E-mail address: (to be used for future annual report notification)

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

One

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: J. P. Skinner & Sons, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address
519 Elizabeth Lane
Lakeland, FL 33809

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

"General Contractor"

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Clayton C. Skinner, Sr. President

Address: 519 Elizabeth Lane
Lakeland, FL 33809

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: Clayton C. Skinner, Sr. Clayton C. Skinner, Sr.
Address: 519 Elizabeth Lane
Lakeland, FL 33809

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Clayton C. Skinner, Sr.
Address: 519 Elizabeth Lane
Lakeland, FL 33809

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

Clayton C. Skinner, Sr.
Required Signature/Registered Agent

Aug. 2, 2012
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.

Clayton C. Skinner, Sr.
Required Signature/Incorporator

Aug. 2, 2012
Date

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TALLAHASSEE, FLORIDA